

LOBBYIST REGISTRATION AFFIDAVIT

1.	Lobbyist Name:	Socks	David	E	· ·
		Last name	First	Middle	
				•	
	Business phone (30)		_	·	*. •
	Mailing Address			Miami Pa State	- 33/3/ Zip
2.	Principal Represented	:i To	wheo		•
	Principal's Address _	9551 E. Bay (If differe	Harboi Dr. B	vay Hosbor Fig	33 5 4
	Other Principals or Int	erests and Address (I	Detail):		
			:	···	
3.	Subject Matter (Descr	ibe in detail):	Property as	1850 NE	123rd St.
	Lobbyist specifically withdraws as a lobbyi				ncipal. Each person who
4.	Registration Fee paid	Yes / No_	(Cash or 0	Check_/)	
	Certificate of Withdra	wal filed? Yes	No		
5	Please identify all Cou	incil people or Personi	nel to be lobbied:	All councilio	embers,
	<u> </u>			<u> </u>	:
6.	The subject matte	r in number (3) above	is to be considered a	t a meeting of: (check a	Il applicable)
GAR	The City Council				
	Zoning Board of	Adjustment	<u>/</u>		
	Planning Commis	ssion	<u>/</u>		
	Other City Board				
	RFP Review/Sele	ction Committee			
	Others (Specify)				



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			OATH		
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STAT	E OF FLORIDA)			
COUN	TY OF MIAMI-DADE)		. 1. 1	
		1.	4		
	gned registrant, do hereby nments are true and correc		under oath and say that t	he information disclos	sed
			Direct	he information disclos	sed
			under oath and say that t	he information disclos	sed
and any attach	nments are true and correc	et.	Signature	he information disclos	sed
and any attach		et.	Signature		sed
and any attach	nments are true and correc	et.	Signature day of May Downla Ir		5€