



## LOBBYIST REGISTRATION AFFIDAVIT

Choose One:

Renewal ☐

Fiscal Year 2023-2024 ☒

1. Lobbyist Name: Fuentes Jose K.  
Last Name First Middle

Lobbyist Phone: (305) 260-1018

Lobbyist Address: 2525 Ponce de Leon Blvd., Suite 825, Coral Gables FL 33134  
Street City State Zip

2. Principal Represented: Performance Services, Inc.

Principal Address: 4670 Haven Point Blvd, Suite 200 Indianapolis IN 46280  
Street City State Zip

Other Principals or Interests and Address (Detail):  
N/A

3. Specific Issue on which the Lobbyist has been retained (Describe in Detail):  
Performance services

Lobbyist specifically includes principal as well as any agent, officer, or employee of a principal. Each person who withdraws as a lobbyist is required to file a Certificate of Withdrawal.

4. Registration Fee paid? NO ☐ YES ☒ (Cash ☐ or Check ☒)

5. Please identify all Council People or Personnel to be lobbied:  
City Council and City Manager

6. The subject matter in number (3) above is to be considered at which meeting? (Check all applicable)

City Council	<input checked="" type="checkbox"/>
Zoning Board of Adjustment	<input type="checkbox"/>
Planning Commission	<input type="checkbox"/>
City Board	<input type="checkbox"/>
RFP Review/Selection Committee	<input type="checkbox"/>
CRA Board	<input type="checkbox"/>
CRA Advisory Committee	<input type="checkbox"/>

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7. Please state the extent of any business, financial, familial, and professional or other relationship which exists with any individual identified in number (5) above.

N/A

OATH

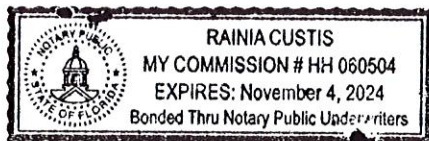
STATE OF FLORIDA )

COUNTY OF MIAMI-DADE )

I, the undersigned registrant, do hereby depose under oath and say that the information disclosed and any attachments are true and correct.

Signature

Sworn to and subscribed before me this 20<sup>th</sup> day of September, 2023.



Notary Public

My Commission Expires: \_\_\_\_\_

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