



City of Coral Gables
Request to Address City Commission

Order of receipt _____

PLEASE PRINT

Date: 4/26/2022 Time: _____

Agenda/Item Number: Kings Bay Sewer

Issue: _____

Name: Koorosh Beyhani

Mailing address: 6420 Martin Drive

City: Coral Gables State/Zip: FL 33158

Phone: 786-543-2520 E-mail: Koorosh2000@yahoo.com

Are you a registered lobbyist with the City of Coral Gables?

Yes No

Representing: Home Owner

- I wish to speak
 I do not wish to speak
 I have been requested to speak
- Proponent
 Opponent
 To provide information

Comments regarding this issue:

 Signature: [Signature]

Pursuant to Article I, Section 24 of the Florida Constitution, this document, and information contained therein, is a public record.



City of Coral Gables
Request to Address City Commission

Order of receipt _____

PLEASE PRINT

Date: 4/26/22 Time: 11:00

Agenda/Item Number: _____

Issue: KINGS BAY SEWER CONVERSION

Name: RUDY NUÑEZ

Mailing address: 14645 SNAPPER DR.

City: CG State/Zip: 33158

Phone: 3) 992-7075 E-mail: RUDY@RNPAVAL.COM

Are you a registered lobbyist with the City of Coral Gables?

Yes No

Representing: SELF + OTHER NEIGHBORS

- I wish to speak
 I do not wish to speak
 I have been requested to speak
- Proponent
 Opponent
 To provide information

Comments regarding this issue:

CITY UNREASONABLY SELECTED K.B. SUBDIVISION FOR SEWER CONVERSION. DUE PROCESS - Equal Protection Violation

Signature: [Signature]

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City of Coral Gables
Request to Address City Commission

Order of receipt _____

PLEASE PRINT

Date: 4-26-22 Time: 11:00 am

Agenda/Item Number: Kings Bay Sewer line

Issue: Grant for line thru Kings Bay

Name: Luere Sorden

Mailing address: 6440 Mitchell Drive

City: Coral Gables State/Zip: 33158

Phone: 305 758 156 E-mail: DrLuereSorden@gmail.com

Are you a registered lobbyist with the City of Coral Gables?

Yes No

Representing: _____

- I wish to speak
 I do not wish to speak
 I have been requested to speak
- Proponent
 Opponent
 To provide information

Comments regarding this issue:

The out of pocket expense to homeowner and the benefit it brings to the community.

Signature: [Signature]

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PLEASE PRINT

Date: 04/26/22 Time: _____

Agenda/Item Number: _____

Issue: I-3

Name: Benabot Oscar Sotolongo - Lexzadith Sotolongo

Mailing address: 14520 Tarpon Dr.

City: Coral Gables State/Zip: 33158

Phone: 305 632 4077 E-mail: osdiezel.fl@gmail.com
305 338 5549 lexzadithsotolongo@yahoo

Are you a registered lobbyist with the City of Coral Gables?

Yes No

Representing: _____

- I wish to speak
 I do not wish to speak
 I have been requested to speak
- Proponent
 Opponent
 To provide information

Comments regarding this issue:

Signature: [Signature]

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City of Coral Gables
Request to Address City Commission

Order of receipt _____

Date: 4/26/2022 PLEASE PRINT Time: 11:00

Agenda/Item Number: Kings Bay I3

Issue: NO SEWERS!

Name: Jennifer & Ren Hodges

Mailing address: 14731 Sailfish Dr

City: CG State/Zip: 33158

Phone: 3053212359 E-mail: jhodges@jhodges.net

Are you a registered lobbyist with the City of Coral Gables?

Yes No

Representing: Self

- | | |
|--|---|
| <input type="checkbox"/> I wish to speak | <input type="checkbox"/> Proponent |
| <input checked="" type="checkbox"/> I do not wish to speak | <input checked="" type="checkbox"/> Opponent |
| <input type="checkbox"/> I have been requested to speak | <input type="checkbox"/> To provide information |

Comments regarding this issue:

DO NOT WANT SEWERS - DO NOT WANT LIMITLESS SPENDING - OPEN CITY CIBOOK-SPENDING - NO NOTICES!

Signature: [Signature]

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Date: 4/26/22 PLEASE PRINT Time: _____

Agenda/Item Number: Kings Bay rewar

Issue: I-3

Name: Daniela & Ron Cohen

Mailing address: 6320 SW Mitchell Dr.

City: Coral Gables State/Zip: 33158

Phone: _____ E-mail: _____

Are you a registered lobbyist with the City of Coral Gables?

Yes No

Representing: _____

- | | |
|---|---|
| <input checked="" type="checkbox"/> I wish to speak | <input type="checkbox"/> Proponent |
| <input type="checkbox"/> I do not wish to speak | <input type="checkbox"/> Opponent |
| <input type="checkbox"/> I have been requested to speak | <input type="checkbox"/> To provide information |

Comments regarding this issue:

3 like NO

Signature: [Signature]

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City of Coral Gables Order of receipt _____
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PLEASE PRINT

Date: _____ Time: _____

Agenda/Item Number: _____

Issue: Kings Bay 11AM

Name: Pawelk Chen

Mailing address: 6240 Dolphin Dr

City: Coral Gables State/Zip: FL 33158

Phone: 7865261575 E-mail: _____

Are you a registered lobbyist with the City of Coral Gables?

Yes No

Representing: _____

- | | |
|---|---|
| <input checked="" type="checkbox"/> I wish to speak | <input type="checkbox"/> Proponent |
| <input type="checkbox"/> I do not wish to speak | <input type="checkbox"/> Opponent |
| <input type="checkbox"/> I have been requested to speak | <input type="checkbox"/> To provide information |

Comments regarding this issue:

Signature _____

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City of Coral Gables Order of receipt _____
Request to Address City Commission

PLEASE PRINT

Date: _____ Time: _____

Agenda/Item Number: Kings Bay 11AM

Issue: _____

Name: Julio Rodriguez

Mailing address: _____

City: _____ State/Zip: _____

Phone: _____ E-mail: _____

Are you a registered lobbyist with the City of Coral Gables?

Yes No

Representing: _____

- | | |
|---|---|
| <input checked="" type="checkbox"/> I wish to speak | <input type="checkbox"/> Proponent |
| <input type="checkbox"/> I do not wish to speak | <input type="checkbox"/> Opponent |
| <input type="checkbox"/> I have been requested to speak | <input type="checkbox"/> To provide information |

Comments regarding this issue:

Signature _____

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City of Coral Gables
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Order of receipt _____

PLEASE PRINT

Date: 4/26/2022 Time: 11:00 am

Agenda/Item Number: Kings Bay

Issue: KINGS BAY SEWER PROJECT

Name: DANIEL CARSEN

Mailing address: 14541 TARPON DR

City: CORAL GABLES State/Zip: FL 33158

Phone: 305-546-3447 E-mail: dwcarsen@yahoo.com

Are you a registered lobbyist with the City of Coral Gables?

Yes No

Representing: _____

- I wish to speak Proponent
 I do not wish to speak Opponent
 I have been requested to speak To provide information

Comments regarding this issue: I am opposed to this project. We have not been properly informed about this project nor have the true costs to us been divulged. This puts us in a bind to our community.

Signature: [Signature]

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PLEASE PRINT

Date: 4/26/22 Time: 11 am

Agenda/Item Number: Kings Bay Sewer line

Issue: Grant for sewer line thru Kings Bay

Name: David Ventrieri

Mailing address: 6440 MITCHELL DR

City: CORAL GABLES State/Zip: 33158

Phone: 305 775 8156 E-mail: ventri9@gmail.com

Are you a registered lobbyist with the City of Coral Gables?

Yes No

Representing: _____

- I wish to speak Proponent
 I do not wish to speak Opponent
 I have been requested to speak To provide information

Comments regarding this issue:

I am adamantly opposed to the grant! project!

Signature: [Signature]

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City of Coral Gables
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Order of receipt _____

Date: 4/26/22 PLEASE PRINT Time: 11:10 am

Agenda/Item Number: _____

Issue: conversion to public sewer system

Name: Mike Samway

Mailing address: 6540 Mahi Dr.

City: CG State/Zip: FL 33158

Phone: 786-367-3570 E-mail: jappy-samway@yahoo.com

Are you a registered lobbyist with the City of Coral Gables?
 Yes No

Representing: _____

- I wish to speak Proponent
 I do not wish to speak Opponent
 I have been requested to speak To provide information

Comments regarding this issue:

Signature: Michael Samway

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City of Coral Gables
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Date: 4-26-2022 PLEASE PRINT Time: 11:00 AM

Agenda/Item Number: KING'S BAY

Issue: SEWER INSTALLATION

Name: ANTHONY CAMPANILE

Mailing address: 6420 MAHI DRIVE

City: CORAL GABLES State/Zip: FL

Phone: _____ E-mail: ACAMPAN@AOL

Are you a registered lobbyist with the City of Coral Gables?
 Yes No

Representing: _____

- I wish to speak Proponent
 I do not wish to speak Opponent
 I have been requested to speak To provide information

Comments regarding this issue:

Signature: _____

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City of Coral Gables
Request to Address City Commission

Order of receipt _____

Date: 4/26 PLEASE PRINT Time: 11:00 AM

Agenda/Item Number: KINGS Bay

Issue: Sewage TAX

Name: Henry Martinek

Mailing address: 14501 Sailfish Drive

City: C.G. State/Zip: FL 33158

Phone: 3/799-9192 E-mail: Henry@MT2FAHSHY.COM

Are you a registered lobbyist with the City of Coral Gables?
 Yes No

Representing: RESIDENT Kings Bay

- | | |
|---|---|
| <input checked="" type="checkbox"/> I wish to speak | <input type="checkbox"/> Proponent |
| <input type="checkbox"/> I do not wish to speak | <input checked="" type="checkbox"/> Opponent |
| <input type="checkbox"/> I have been requested to speak | <input type="checkbox"/> To provide information |

Comments regarding this issue:

Signature: [Signature]

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City of Coral Gables
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Date: 4-26-22 PLEASE PRINT Time: 11AM

Agenda/Item Number: _____

Issue: KING'S BAY SEWER CONVERSION

Name: SANDRA CARSON

Mailing address: 14541 TARPON DR

City: CG State/Zip: FL

Phone: 305 241 5136 E-mail: SandraCarson@gmail.com

Are you a registered lobbyist with the City of Coral Gables?
 Yes No

Representing: _____

- | | |
|---|---|
| <input checked="" type="checkbox"/> I wish to speak | <input type="checkbox"/> Proponent |
| <input type="checkbox"/> I do not wish to speak | <input checked="" type="checkbox"/> Opponent |
| <input type="checkbox"/> I have been requested to speak | <input type="checkbox"/> To provide information |

Comments regarding this issue:

Signature: [Signature]

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Request to Address City Commission

Date: 04/26/22 PLEASE PRINT Time: _____

Agenda/Item Number: _____

Issue: Kings Bay Sewer Conversion

Name: MIRIAM FROMETA

Mailing address: 6430 Mitchell Drive

City: Coral Gables State/Zip: FL, 33158

Phone: 786 204 4429 E-mail: miriam.frometa@gmail.com

Are you a registered lobbyist with the City of Coral Gables?
 Yes No
 Representing: Self, husband & other neighbors

- I wish to speak
- I do not wish to speak
- I have been requested to speak
- Proponent
- Opponent
- To provide information

Comments regarding this issue:
Don't want it. Won't pay for it.
 Signature: [Handwritten Signature]

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City of Coral Gables Order of receipt _____
Request to Address City Commission

Date: 4-26-2022 PLEASE PRINT Time: 11:05

Agenda/Item Number: KB Sewers

Issue: Running Kings Bay Sewer Sys

Name: Andres Stefan

Mailing address: 14585 Sailfish Dr.

City: Coral Gables State/Zip: FL

Phone: 786 205 8853 E-mail: 14stef2121@AOL.com

Are you a registered lobbyist with the City of Coral Gables?
 Yes No
 Representing: Myself as property owner

- I wish to speak
- I do not wish to speak
- I have been requested to speak
- Proponent
- Opponent
- To provide information

Comments regarding this issue:
I will not pay for this!
 Signature: [Handwritten Signature]

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City of Coral Gables Order of receipt _____
Request to Address City Commission

PLEASE PRINT

Date: 4-26-22 Time: 11:01

Agenda/Item Number: _____

Issue: Kings Bay Costs

Name: Jeff Frette

Mailing address: 14720 Snapper Dr.

City: Coral Gables State/Zip: FL 33158

Phone: 305-215-0250 E-mail: jeff.frette@gmail.com

Are you a registered lobbyist with the City of Coral Gables?

Yes No

Representing: _____

- | | |
|---|---|
| <input checked="" type="checkbox"/> I wish to speak | <input type="checkbox"/> Proponent |
| <input type="checkbox"/> I do not wish to speak | <input type="checkbox"/> Opponent |
| <input type="checkbox"/> I have been requested to speak | <input type="checkbox"/> To provide information |

Comments regarding this issue:

Tens of thousands of dollars in unforeseen and unexpected costs are not welcomed. Too much a financial burden to ask of the homeowners.

Signature: [Signature]

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City of Coral Gables Order of receipt _____
Request to Address City Commission

PLEASE PRINT

Date: 4-26-2022 Time: 11:03

Agenda/Item Number: Sewers in Kings Bay

Issue: Voting on Running Sewers in KB

Name: Maria Stefanou

Mailing address: 14585 Sailfish Drive

City: Coral Gables State/Zip: FL 33158

Phone: 786 205 8852 E-mail: MStef2121@aol.com

Are you a registered lobbyist with the City of Coral Gables?

Yes No

Representing: Myself

- | | |
|---|---|
| <input checked="" type="checkbox"/> I wish to speak | <input type="checkbox"/> Proponent |
| <input type="checkbox"/> I do not wish to speak | <input checked="" type="checkbox"/> Opponent |
| <input type="checkbox"/> I have been requested to speak | <input type="checkbox"/> To provide information |

Comments regarding this issue:

I DO NOT AGREE WITH RUNNING SEWERS TO MY PROPERTY!

Signature: [Signature]

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Order of receipt _____

PLEASE PRINT

Date: _____ Time: _____

Agenda/Item Number: _____

Issue: _____

Name: Eric Frankel Field

Mailing address: 14772 Lakeside Rd

City: Coral Gables State/Zip: FL

Phone: _____ E-mail: _____

Are you a registered lobbyist with the City of Coral Gables?

Yes No

Representing: Kings Bay

- I wish to speak
- I do not wish to speak
- I have been requested to speak
- Proponent
- Opponent
- To provide information

Comments regarding this issue:

Signature _____

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City of Coral Gables
Request to Address City Commission

Order of receipt _____

PLEASE PRINT

Date: 26 April 2022 Time: _____

Agenda/Item Number: _____

Issue: Signs to speed conversion Kings Bay

Name: Arday Siv

Mailing address: 2355 NE 191 St

City: Miami State/Zip: FL 33180

Phone: 305 586 0151 E-mail: _____

Are you a registered lobbyist with the City of Coral Gables?

Yes No

Representing: Miami Waterways

- I wish to speak
- I do not wish to speak
- I have been requested to speak
- Proponent
- Opponent
- To provide information

Comments regarding this issue:

Signature Arday Siv

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City of Coral Gables Order of receipt _____
Request to Address City Commission

PLEASE PRINT

Date: 4-26-22 Time: 10:17

Agenda/Item Number: _____

Issue: Kings Bay Sewer

Name: DAVID Hill

Mailing address: 6601 Marlin Dr.

City: Coral Gables State/Zip: FL 33158

Phone: 305-788-0220 E-mail: DH.DAVE@Ad.com

Are you a registered lobbyist with the City of Coral Gables?
 Yes No

Representing: _____

- I wish to speak
- I do not wish to speak
- I have been requested to speak
- Proponent
- Opponent
- To provide information

Comments regarding this issue:

Signature David Hill

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City of Coral Gables Order of receipt _____
Request to Address City Commission

PLEASE PRINT

Date: _____ Time: _____

Agenda/Item Number: _____

Issue: Kings Bay

Name: Miles Maranto

Mailing address: 6230 Dolphin Dr

City: CG State/Zip: 33158

Phone: 305 502-300 E-mail: milesbysea@gma.com

Are you a registered lobbyist with the City of Coral Gables?
 Yes No

Representing: Kings Bay

- I wish to speak
- I do not wish to speak
- I have been requested to speak
- Proponent
- Opponent
- To provide information

Comments regarding this issue:

Vote No, to new taxes or special
assessments or partial grants

Signature _____

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City of Coral Gables
Request to Address City Commission

Order of receipt

Date: 4/26/22 PLEASE PRINT Time: 9:05

Agenda/Item Number: I-3 22-4035

Issue: Septhic to Sewer Commission

Name: Anthony Escarri

Mailing address: 5111 NW 1st

City: Miami State/Zip: FL 33128

Phone: 786-747-1490 E-mail: _____

Are you a registered lobbyist with the City of Coral Gables?

- Yes
- No

Representing: Commissioner Regalado D7

- I wish to speak
- I do not wish to speak
- I have been requested to speak
- Proponent
- Opponent
- To provide information

Comments regarding this issue:

Please Do Not Item

Signature [Handwritten Signature]