



**City of Coral Gables**  
**Request to Address City Commission**

Order of receipt \_\_\_\_\_

PLEASE PRINT

Date: 1/23 Time: 11:30

Agenda/Item Number: Fritze Frows

Issue: LEAS

Name: RAY NEWLANDS - chof

Mailing address: 3133 SW 13 St

City: Miami State/Zip: FL 33141

Phone: 3057011452 E-mail: shonkchof@attorney.com

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

Representing: shonkchof

- 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:  
LAND MARK! Fritze

Signature: [Signature]



**City of Coral Gables**  
**Request to Address City Commission**

Order of receipt \_\_\_\_\_

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Date: 1/23/2024 Time: 5:24

Agenda/Item Number: F-5

Issue: \_\_\_\_\_

Name: William Riemer

Mailing address: \_\_\_\_\_

City: \_\_\_\_\_ State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

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: \_\_\_\_\_



**City of Coral Gables**  
**Request to Address City Commission**

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Date: 1/23/24 Time: \_\_\_\_\_

Agenda/Item Number: F-5

Issue: \_\_\_\_\_

Name: MARIA C. CRUZ

Mailing address: 1447 Millers Rd

City: C.G. State/Zip: FL 33146

Phone: 305-323-2154 E-mail: hobeadcruz4@aol.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:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Signature: Maria Cruz

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



**City of Coral Gables**  
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PLEASE PRINT

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Agenda/Item Number: F-5

Issue: \_\_\_\_\_

Name: DIRK PAECKER

Mailing address: \_\_\_\_\_

City: \_\_\_\_\_ State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

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

Representing: \_\_\_\_\_

- |   |   |
|---|---|
| <input 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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Date: 1/23 Time: 11:30

Agenda/Item Number: F 5

Issue: LEASE

Name: HARALD NEUWEG

Mailing address: 18900

City: \_\_\_\_\_ State/Zip: 33132

Phone: \_\_\_\_\_ E-mail: hn25@aol.com

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

Representing: F + F Bienenhaus

- |   |   |
|---|---|
| <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: [Handwritten Signature]

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Date: 1-23-23 Time: 11:30

Agenda/Item Number: Fritz Franz

Issue: Fritz Franz

Name: Federico Sixto

Mailing address: 2450 NE 13th St.

City: NORTH MIAMI State/Zip: FL 33100

Phone: 305-205-7805 E-mail: FSIXTO@igumail.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:

Signature: [Handwritten Signature]

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PLEASE PRINT

Date: 02/23/24 Time: \_\_\_\_\_

Agenda/Item Number: Fritz Franz

Issue: Fritz Franz

Name: Francisco Appec

Mailing address: 235 Sidonia ave Apt 205

City: Coral Gables State/Zip: \_\_\_\_\_

Phone: 786-423-3613 E-mail: Franku0126@gmail

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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Date: 1/23/24 Time: 5:10

Agenda/Item Number: Fritz Franz

Issue: \_\_\_\_\_

Name: Jorge Arnao

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:

Fritz Franz  
 \_\_\_\_\_  
 \_\_\_\_\_

Signature: \_\_\_\_\_

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Request to Address City Commission

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PLEASE PRINT

Date: 1/23/2024 Time: 11:15 AM

Agenda/Item Number: F-5 #24-6932

Issue: Lease to Fritz and Franz

Name: Tom Wells

Mailing address: 1310 Coral Way

City: Coral Gables State/Zip: FL 33134

Phone: 305 588-3984 E-mail: tometwells@law.com

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

Yes  No

Representing: Residents

- 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:

Supporting continuation of leasing space to Fritz & Franz

Signature Thomas Wells