




City of Coral Gables
Request to Address City Commission

Order of receipt _____

Date: 2/28/11 PLEASE PRINT Time: _____

Agenda/Item Number: F-10

Issue: _____

 Maria C. Cruz
1447 Miller Rd.
Coral Gables, FL 33146-2307

Phone: 305-323-2154 E-mail: thebeachwazy@no1.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 C. Cruz