



City of Coral Gables
Request to Address City Commission


Order of receipt _____

Date: 6/13/23 PLEASE PRINT Time: _____

Agenda/Item Number: C-4

Issue: _____

Name: _____

Mailing address:  Maria Cruz
1447 Miller Rd
Coral Gables, FL 33146-2307

City: _____ State/Zip: _____

Phone: 305-323-2154 E-mail: thebeachency@ad1.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
Request to Address City Commission

Order of receipt _____

Date: 6/13/23 PLEASE PRINT Time: _____

Agenda/Item Number: C-84

Issue: US-1 STUDY

Name: ROBERT RUANO

Mailing address: 1544 MURCIA AVE

City: _____ State/Zip: _____

Phone: _____ E-mail: _____

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

Representing: Myself

- | | |
|---|---|
| <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: Robert Ruano

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