FORM 1	STATEM	STATEMENT OF		2019	
	FINANCIAL	INTERESTS		FOR OFFICE USE ONLY:	
Mikkie Belvedere 225210 Coconut Creek City Commissi 3502 Bimini Ln Apt N1 Coconut Creek, FL 33066	oner		*		
CHECK ONLY IF (CANDIDATE	OR NEW EMPLOYEE OR	The same of the sa			
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YO	OUR FINANCIAL INTERESTS FO			CEMBER 31, 2019.	
MANNER OF CALCULATING FILERS HAVE THE OPTION OF L FEWER CALCULATIONS, OR US (see instructions for further details) COMPARATIVE (P	SING REPORTING THRESHOLING COMPARATIVE THRESHOL	DS THAT ARE ABSOLUTE LDS, WHICH ARE USUALI SING (must check one) :	Y BASE		
PART A PRIMARY SOURCES OF I	NCOME [Major sources of income to	the reporting person - See inst	ructions]		
(If you have nothing to rep	oort, write "none" or "n/a")				
NAME OF SOURCE OF INCOME		URCE'S DRESS		SCRIPTION OF THE SOURCE'S SINCIPAL BUSINESS ACTIVITY	
·/Λ					
J/H				Walter State of the Control of the C	
PART B SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a")					
NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE		PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
114					
V 11					
PART C REAL PROPERTY [Land, buildings owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a")			You are not limited to the space on the lines on this form. Attach additional sheets, if necessary.		
N/A			FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.		
				INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.	

PART D — INTANGIBLE PERSONAL PROPERTY [Sto	tocks, bonds, certificates of deposit, etc See instructions] ne" or "n/a")			
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES			
JIXIX VARIOUS IS	anks Accounts			
MAN / WEST SEE				
PART E — LIABILITIES [Major debts - See instructions] (If you have nothing to report, write "none				
NAME OF CREDITOR	ADDRESS OF CREDITOR			
11/4				
N M				
PART F — INTERESTS IN SPECIFIED BUSINESSES [C (If you have nothing to report, write "none	Ownership or positions in certain types of businesses - See instructions] e" or "n/a") BUSINESS ENTITY#1 BUSINESS ENTITY#2			
NAME OF BUSINESS ENTITY				
ADDRESS OF BUSINESS ENTITY				
PRINCIPAL BUSINESS ACTIVITY				
POSITION HELD WITH ENTITY				
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS				
NATURE OF MY OWNERSHIP INTEREST				
7	HAVE COMPLETED THE REQUIRED TRAINING. E CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE			
SIGNATURE OF FILE				
Signature:	If a certified public accountant licensed under Chapter 473, or attorney in good standing with the Florida Bar prepared this form for you, he or she must complete the following statement:			
Mehhir Behredere Date Signed: 5/29/2020	I,, prepared the CE Form 1 in accordance with Section 112.3145, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the disclosure herein is true and correct.			
al 1	CPA/Attorney Signature:			
5/29/2020	Date Signed:			

FILING INSTRUCTIONS:

If you were mailed the form by the Commission on Ethics or a County Supervisor of Elections for your annual disclosure filing, return the form to that location. To determine what category your position falls under, see page 3 of instructions.

Local officers/employees file with the Supervisor of Elections of the county in which they permanently reside. (If you do not permanently reside in Florida, file with the Supervisor of the county where your agency has its headquarters.) Form 1 filers who file with the Supervisor of Elections may file by mail or email. Contact your Supervisor of Elections for the mailing address or email address to use. Do not email your form to the Commission on Ethics, it will be returned.

State officers or specified state employees who file with the Commission on Ethics may file by mail or email. To file by mail, send the completed form to P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 325 John Knox Rd, Bldg E, Ste 200, Tallahassee, FL 32303. To file with the Commission by email, scan your completed form and any attachments as a pdf (do not use any other format), send it to CEForm1@leg.state.fl.us and retain a copy for your records. Do not file by both mail and email. Choose only one filing method. Form 6s will not be accepted via email.

Candidates file this form together with their filing papers.

MULTIPLE FILING UNNECESSARY: A candidate who files a Form 1 with a qualifying officer is not required to file with the Commission or Supervisor of Elections.

WHEN TO FILE: Initially, each local officer/employee, state officer, and specified state employee must file within 30 days of the date of his or her appointment or of the beginning of employment. Appointees who must be confirmed by the Senate must file prior to confirmation, even if that is less than 30 days from the date of their appointment.

Candidates must file at the same time they file their qualifying papers.

Thereafter, file by July 1 following each calendar year in which they hold their positions.

Finally, file a final disclosure form (Form 1F) within 60 days of leaving office or employment. Filing a CE Form 1F (Final Statement of Financial Interests) does not relieve the filer of filing a CE Form 1 if the filer was in his or her position on December 31, 2019.