FORM 1

STATEMENT OF

2015

Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTERESTS	FOR OFFICE USE ONLY:
LAST NAME FIRST NAME MIDDLE Soto Alexander Oscar	NAME:		
MAILING ADDRESS :			
28 Cayuga Road			
CITY: Sea Ranch Lakes	ZIP: COUNTY: 33308 broward		
NAME OF AGENCY:	55506 bloward		
NAME OF OFFICE OR POSITION HELD Mayor	OR SOUGHT:		
You are not limited to the space on the line	es on this form. Attach additional sheet	s, if necessary.	
CHECK ONLY IF CANDIDATE	OR NEW EMPLOYEE OR	APPOINTEE	
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR		E PRECEDING TAX YEAR	WPLETED **** R, WHETHER BASED ON A CALENDAR THE PRECEDING TAX YEAR ENDING
DECEMBER 31, 201	5 OR D SPECIF	TAX YEAR IF OTHER THA	AN THE CALENDAR YEAR:
CALCULATIONS, OR USING COMPA for further details). CHECK THE ONE COMPARATIVE (PE PART A - PRIMARY SOURCES OF INC	RATIVE THRESHOLDS, WHICH A YOU ARE USING (must check o RCENTAGE) THRESHOLDS OME [Major sources of income to the	ARE USUALLY BASED ON ne): OR DOLL	AR VALUES, WHICH REQUIRES FEWE I PERCENTAGE VALUES (see instruction AR VALUE THRESHOLDS tructions)
(If you have nothing to repo		RCE'S	DESCRIPTION OF THE SOURCE'S
OF INCOME		RESS	PRINCIPAL BUSINESS ACTIVITY
Alexander Oscar Soto, P.A.	2400 E. Commercial Blvd, F	T Lauderdale	Attorney
PART B - SECONDARY SOURCES OF [Major customers, clients, and (If you have nothing to repo	other sources of income to business	es owned by the reporting per	rson - See instructions]
NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
PART C - REAL PROPERTY [Land, bui		- See instructions]	FILING INSTRUCTIONS for when
28 Cayuga Road, Sea Ranch Lakes			and where to file this form are located at the bottom of page 2.
			INSTRUCTIONS on who must flic this form and how to fill it out begin on page 3.
			negin on page o.

TYPE OF INTANGIBLE	"none" or "n/a")	estructions]		
	BUSINESS ENTITY TO	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES		
	-			
PART E — LIABILITIES [Major debts - See instru	uctions]			
(If you have nothing to report, write	"none" or "n/a")			
NAME OF CREDITOR	ADDRE	ADDRESS OF CREDITOR		
Nation Star	8950 Cypress waters blvd, coppell TX			
PART F INTERESTS IN SPECIFIED BUSINESS (W you have nothing to report, write "I	ES [Ownership or positions in certain types of but none" or "n/a") BUSINESS ENTITY # 1	BUSINESS ENTITY # 2		
ADDRESS OF BUSINESS ENTITY				
PRINCIPAL BUSINESS ACTIVITY				
POSITION HELD WITH ENTITY				
I OWN MORE THAN A 5% INTEREST IN THE BUSIN	NESS			
NATURE OF MY OWNERSHIP INTEREST				
	ate annual ethics training pursuant to section 112.314 AT I HAVE COMPLETED THE REC			
	ARE CONTINUED ON A SEPARATE SH			
IF ANY OF PARTS A THROUGH G	ARE CONTINUED ON A SEPARATE SH	EET, PLEASE CHECK HERE		
	ARE CONTINUED ON A SEPARATE SH CPA or ATT If a certified public act in good standing with she must complete the I, Form 1 in accordance	CORNEY SIGNATURE ONLY Countant licensed under Chapter 473, or attorner the Florida Bar prepared this form for you, he or e following statement: prepared the Country of the Section 112.3145, Florida Statutes, and the		
IF ANY OF PARTS A THROUGH G	ARE CONTINUED ON A SEPARATE SH CPA or ATT If a certified public act in good standing with she must complete the I, Form 1 in accordance	CORNEY SIGNATURE ONLY countant licensed under Chapter 473, or attorner the Florida Bar prepared this form for you, he or e following statement: , prepared the C e with Section 112.3145, Florida Statutes, and the n. Upon my reasonable knowledge and belief, the use and correct.		
SIGNATURE OF F Signature: Date Signed:	ARE CONTINUED ON A SEPARATE SH CPA or ATT If a certifled public acin good standing with she must complete the l, Form 1 in accordance instructions to the form disclosure herein is the CPA/Attorney Signature.	CORNEY SIGNATURE ONLY countant licensed under Chapter 473, or attorner the Florida Bar prepared this form for you, he or a following statement:		

After completing all parts of this form, including signing and dating it, send back only the first sheet (pages 1 and 2) for filling.

If you have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).

NOTE:

MULTIPLE FILING UNNECESSARY:

A candidate who previously filed Form 1 because of another public position must file a copy of his or her Form 1 when qualifying. A candidate who files a Form 1 with a qualifying officer is not required to file with the Commission or Supervisor of Elections.

Facsimiles will not be accepted.

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.

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.)

State officers or specified state employees file with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 325 John Knox Road, Building E, Suite 200. Tallahassee, FL 32303.

Candidates file this form together with their qualifying papers.

To determine what category your position falls under, see page 3 of instructions.

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, 2015.