HAND DELIVERED

FORM 6 FULL AND PUBLIC DISCLOSURE OF FINANCIAL INTERESTS 2012

Please print or type your name, mailing address, agency name, and position below :

FOR OFFICE USE ONLY:

PROCESSED
COMMISSION ON ETHICS
DATE RECEIVED
AUG 29 2013
234549

LAST NAME — FIRST NAME — MIDDLE NAME:
Diaz de la Portilla Miguel Angel

MAILING ADDRESS:
200 S. Biscayne Blvd 36 Fl

CITY : Miami ZIP : Fl COUNTY : 33131

NAME OF AGENCY :

NAME OF OFFICE OR POSITION HELD OR SOUGHT :
State Senate District 40

CHECK IF THIS IS A FILING BY A CANDIDATE ☑

PART A -- NET WORTH

Please enter the value of your net worth as of December 31, 2012, or a more current date. [Note: Net worth is not calculated by subtracting your *reported* liabilities from your *reported* assets, so please see the instructions on page 3.]

My net worth as of December 31, 20 12 was $ 770,597.44

PART B -- ASSETS

HOUSEHOLD GOODS AND PERSONAL EFFECTS:
Household goods and personal effects may be reported in a lump sum if their aggregate value exceeds $1,000. This category includes any of the following, if not held for investment purposes: jewelry; collections of stamps, guns, and numismatic items; art objects; household equipment and furnishings; clothing; other household items; and vehicles for personal use.

The aggregate value of my household goods and personal effects (described above) is $ 175,523.50

ASSETS INDIVIDUALLY VALUED AT OVER $1,000:

DESCRIPTION OF ASSET (specific description is required - see instructions page 4)	VALUE OF ASSET
See Exhibit "A."	

PART C -- LIABILITIES

LIABILITIES IN EXCESS OF $1,000 (See Instructions on page 4):

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
See Exhibit "A."	

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
See Exhibit "A."	

(Continued on reverse side)

PART D -- INCOME

You may *EITHER* (1) file a complete copy of your 2012 federal income tax return, *including all W2's, schedules, and attachments*, **OR** (2) file a sworn statement identifying each separate source and amount of income which exceeds $1,000, including secondary sources of income, by completing the remainder of Part D, below.

☐ I elect to file a copy of my 2012 federal income tax return and all W2's, schedules, and attachments.
[If you check this box and attach a copy of your 2012 tax return, you need not complete the remainder of Part D.]

PRIMARY SOURCES OF INCOME (See instructions on page 5):

NAME OF SOURCE OF INCOME EXCEEDING $1,000	ADDRESS OF SOURCE OF INCOME	AMOUNT
Becker & Poliakoff, P.A	121 Alhambra Plaza 10th FL; Coral Gables, Fl 33134	$410,855.19
State of Florida	409 Capitol; Tallahassee, Florida 32399	$29,697.00

SECONDARY SOURCES OF INCOME [Major customers, clients, etc., of businesses owned by reporting person--see instructions on page 5]:

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
n/a			

PART E -- INTERESTS IN SPECIFIED BUSINESSES [Instructions on page 6]

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY	n/a	n/a	n/a
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			

IF ANY OF PARTS A THROUGH E ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE ☐

OATH

I, the person whose name appears at the beginning of this form, do depose on oath or affirmation and say that the information disclosed on this form and any attachments hereto is true, accurate, and complete.

Notary Public State of Florida
Blanca E. Fernandez
My Commission EE 206369
Expires 06/25/2016

[signature]

SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE

STATE OF FLORIDA
COUNTY OF Miami-Dade

Sworn to (or affirmed) and subscribed before me this 27th day of August, 2013 by Miguel Diaz de la Portilla

Blanca E. Fernandez
(Signature of Notary Public--State of Florida)

Blanca E. Fernandez
(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known ✓ *OR* Produced Identification ______

Type of Identification Produced ______

FILING INSTRUCTIONS for when and where to file this form are located at the top of page 3.
INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.
OTHER FORMS you may need to file are described on page 6.

Exhibit A

ASSETS:

1. Home/Residence $850,000.00
   923 Andres Ave
   Coral Gables, Florida 33134
2. Charles Schwab 401 (k) Account $65,671.43
   Position(s): Dodge and Cox Balance Fund –DODBX – 100%
   211 Main Street
   San Fransisco, CA 94105
3. John Hancock 401(k) Account $125,517.05
   Position(s): Lifestyle Balance Mutual Fund – JILBX - 100%
   601 Congress Street
   Boston, MA 02210
4. Sun Trust Bank $22,355.39
   Personal Checking
5. BMW X3 2013 model $21,999.77
   July 2012-7/25/15
   $709.67 – monthly lease payment
   BMW Financial Services
   PO Box 9001065
   Louisville, KY 402290-1065
6. BMW X6 2013 model $36,216.32
   Aug 13, 2012-8/13/15
   $1131.76 - – monthly lease payment
7. Honda Fit Sport 2012 $7387.44
   Aug 12. 2015 maturity
   $307.81
   Honda Financial Services
   PO Box 105027

LIABILITIES:

1. Home Mortgage $468,469.93
   NationStar

PO Box 650783

Dallas, TX 75265

2. BMW X3 2013 model $21,999.77

   July 2012-7/25/15

   $709.67 – monthly lease payment

   BMW Financial Services

   PO Box 9001065

   Louisville, KY 402290-1065

3. BMW X6 20131 model $36,216.32

   Aug 13,2012-8/13/15

   $1131.76 - – monthly lease payment

4. Honda Fit Sport 2012 $7387.44

   Aug 12. 2015 maturity

   $307.81

   Honda Financial Services

   PO Box 105027

   Atlanta 30348