

**FORM 6**

**FULL AND PUBLIC DISCLOSURE  
OF FINANCIAL INTEREST**

**2013**

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

**RECEIVED**  
FOR OFFICE USE ONLY:

LAST NAME — FIRST NAME — MIDDLE NAME:

Monestime Jean

2014 JUN 10 AM 11:17

MIAMI-DADE COUNTY  
ELECTIONS DEPARTMENT

**PROCESSED**

**68597**

MAILING ADDRESS:

900 NE 125 St Suite 200

CITY:

North Miami

ZIP:

33161

COUNTY:

Miami-Dade

NAME OF AGENCY:

NAME OF OFFICE OR POSITION HELD OR SOUGHT:

COUNTY COMMISSIONER, District 2

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, 2013, 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 13 was \$ (Approx) 89,400.00

**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 \$ \_\_\_\_\_

**ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:**

DESCRIPTION OF ASSET (specific description is required - see instructions p.4)	VALUE OF ASSET
MUSICAL INSTRUMENTS, JEWELRY, PAINTINGS, CASH (\$2,000 JOINT) (See Addendum)	8,400.00
ESTIMATED VALUE OF BUSINESS INTEREST	(Approx.) 40,000.00
CARS (2): BENZ 320 (2001), TOYOTA CAMRY (2002)	(Approx.) 7,000.00
HOMES (2): RESIDENCE (160K), 129 STREET (100K)	(Approx.) 260,000.00
LAND IN COLLIER, PUTNAM, CLAY, SEWANEE, AND MARION COUNTIES	(Approx.) 220,000.00

**PART C -- LIABILITIES**

**LIABILITIES IN EXCESS OF \$1,000 (See instructions on page 4):**

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
STUDENT LOANS <i>Waller Mae P.O. Box 9635 Wilkes Bams. PA ZIP 18773-9635</i>	26,000.00

**JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:**

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
ASC-MORT P.O BOX 10388 DESMOINE, IA 50306-0388	202,000.00
EMC MORTGAGE P.O BOX 6606530, DALLAS, TX 75266-0530	161,000.00
SE CAPITAL 3111 FORTUNE WAY, WELLINGTON, FL 33414	83,000.00

**PART D -- INCOME**

You may **EITHER** (1) file a complete copy of your 2013 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 2013 federal income tax return and all W2's, schedules, and attachments.  
 (If you check this box and attach a copy of your 2013 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
JEMO ENTERPRISES, LLC	666 NE 125 ST SUITE 232, N MIAMI, FL 33161	Approx \$10K
MIAMI-DADE COUNTY	111 NW 1 ST, MIAMI, FL 33128	50,200.00

**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 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	JEMO INSURANCE	SOPRODIS, S.A	
ADDRESS OF BUSINESS ENTITY	666 NE 125 ST, N MIAMI, FL 33161	666 NE 125 ST, N. MIAMI, FL 33161	
PRINCIPAL BUSINESS ACTIVITY	INSURANCE BUSINESS	PHARM. PROD. EXPORT	
POSITION HELD WITH ENTITY	NONE	NONE	
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	YES	YES	
NATURE OF MY OWNERSHIP INTEREST	PASSIVE	PASSIVE	

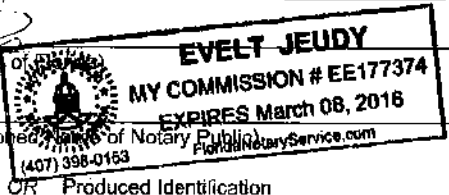
**IF ANY OF PARTS A THROUGH E ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE**

**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.

STATE OF FLORIDA  
 COUNTY OF DADE

Sworn to (or affirmed) and subscribed before me this 9<sup>th</sup> day of JUNE, 2014 by \_\_\_\_\_

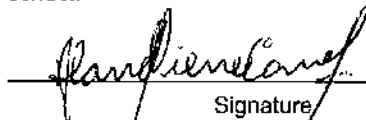
(Signature of Notary Public - State of Florida)  
  
 (Print, Type, or Stamp Commissioned Notary Public)  
 Personally Known  OR Produced Identification \_\_\_\_\_

  
 SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE

Type of Identification Produced \_\_\_\_\_

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:

I, Aland Pierre-Canel, CPA, prepared the CE Form 6 in accordance with Art. II, Sec. 8, Florida Constitution, Section 112.3144, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the disclosure herein is true and correct.

  
 Signature

6/10/14  
 Date

**Preparation of this form by a CPA or attorney does not relieve the filer of the responsibility to sign the form under oath.**

ADDENDUM TO FULL AND PUBLIC DISCLOSURE ON FINANCIAL INTEREST-FORM 6

**RECEIVED**

**2014 JUN 10 AM 11: 17**

**COMMISSIONER: JEAN MONESTIME**

**MIAMI-DADE COUNTY  
ELECTIONS DEPARTMENT**

DESCRIPTION OF ASSET	AMOUNT
SPACE COAST CREDIT UNION 11402 NW 41 ST #116, DORAL FLORIDA 33178	1,458.30
BANK OF AMERICA 990 NE 125 ST, N. MIAMI, FL 33161	493.00
<b>TOTAL</b>	<b>1,951.30</b>