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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED FEC MAIL CENTER

7M@midelQse Only AM 11: 17

1.	NAME COMM	OF TTEE (in full)	TYPE OR	PRINT ▼		ample: If ty er the lines		12FF	4M5		
Ā	SSOC:	ATION OF F	LORAL	IMPORTER	RS OF F	LORIDA	L BOI I T	ICAL A	CTION CC	MMIT	<u>per l</u>
		<u> </u>									
ADI	PRESS (number and street)	87.25	N. W. 1	8 Terr	., Sui	te 106	لللا			
	the	eck if different in previously ported. (ACC)	MIAM	<u>- </u>				LFL	3317		<u></u>
2.	FEC ID	ENTIFICATION N	UMBER ·▼	, 	CITY			STATE	.	ZIP CO	DE A
	C	0173161		3	IS THIS REPORT	X	NĖW (N) O I	R 🔲	AMENDED (A)		
4.	TYPE (Choose	OF REPORT		oort 🕌	Feb 20 (M2)		May 20 (M	15)	Aug 20 (M8)		Nov 20 (M11) (Non-Election Year Only)
	(a) Qu	arterly Reports:	Due	On:	Mar 20 (M3)	المسيال وحسي	Jun 20 (M	6)	Sep 20 (M9)		Dec 20 (M12) (Non-Election Year Only)
	П	April 15 Quarterly Report (0	,, <u> </u>		Apr 20 (M4)		Jul 20 (M7		Oct 20 (M10)	<u> </u>	Jan 31 (YE)
	X	July 15 Quarterly Report (C	(6)	12-Day PRE-Election Report for the		Primary (1	•	المدة المدة	eneral (12G) ecial (12S)		Runoff (12R)
		October 15 Quarterly Report (0	23)	neport for the	e:	Convention		lb-mdl			•
		January 31 Year-End Report (Y	(E)	El	ection on		/	/ (***)		in the State of	of
	. 0	July 31 Mid-Year Report (Non-electio Year Only) (MY)	on (d)	30-Day POST-Election	L.,	General (3	10G)	Ru	noff (30R)		Special (30S)
		Termination Report	1		- .		Fire sale Revolution				-

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Election on

Type or Print Name of Treasurer

(TER)

5. Covering Period

Signature of Treasurer

Chint	ine Boldt.	
	<u> </u>	•

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in the

State of

2008

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

through

	Office				FEC FORM 3X	
1	Use	,			Rev. 12/2004	
<u></u>	Only				11011 (1220)	
		 	 	 	 •	

	FEC Form 3X (Rev. 02/2003)	OF RECEIPTS AND DISBURSEMENTS	Page 2
W	rite or Type Committee Name		
_	Association of Flora	1 Importers of Flo	rida Political Action Committee
R	eport Covering the Period: From:	TO 8 00 4 10 1 4 10 10 10 10 10 10 10 10 10 10 10 10 10	56 30 3008
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1,		
	(b) Cash on Hand at Beginning of Reporting Period	1,058,8,4	
	(c) Total Receipts (from Line 19)	10,30.1.89	10,302,14
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	11.36073	1.1.8.65.73
7.	Total Disbursements (from Line 31)	530,60	5.75.60
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	ID83D13	1.0,830,13
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10.	Debts and Obligations Owed BY the Committee (Itemize all on		

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

Schedule C and/or Schedule D)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

FEC Form 3X (Rev. 02/2003)

DETAILED SUMMARY PAGE

of Receipts

Page 3

Write or Type Committee Name

Association of Flora	l Importers of Florida	Political Action Comm
	TOTAL / BEE / POTOTO	

A_	eport Covering the Period: From:	# 61 2008 T	ෙ රිරි ් ප්ර ් ප් රර්ෂි
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees		
	(i) Itemized (use Schedule A)	00,00,00	10,300,00
	(ii) Unitemized(iii) TOTAL (add		
	Lines 11(a)(i) and (ii)		
	(b) Political Party Committees		
	(c) Other Political Committees (such as PACs)		
	(d) Total Contributions (add Lines		
	11(a)(iii), (b), and (c)) (Carry		
	Totals to Line 33, page 5)▶		
12.	Transfers From Affiliated/Other		
	Party Committees		
13.	All Loans Received		
14.	Loan Repayments Received		
	Offsets To Operating Expenditures		
	(Refunds, Rebates, etc.)		
	(Carry Totals to Line 37, page 5)		
16.	Refunds of Contributions Made		
	to Federal Candidates and Other Political Committees		
17	Other Federal Receipts		
•••	(Dividends, Interest, etc.)	189	214
18.	Transfers from Non-Federal and Levin Funds		
	(a) Non-Federal Account		
	(from Schedule H3)		
	(b) Levin Funds (from Schedule H5)		
	(c) Total Transfers (add 18(a) and 18(b))		
10	Total Passints (add Lines 44/d)		
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	P&105.Q1.	10,302,14
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶		

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DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures:	1044 1110 1 01104	Calendar rear-to-bate
	(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
	(i) Federal Share		
	()		
	(ii) Non-Federal Share		
	(b) Other Federal Operating		
	Expenditures		
	(c) Total Operating Expenditures		
	(add 21(a)(i), (a)(ii), and (b))▶		and bearing the second and the secon
22.	Transfers to Affiliated/Other Party		ing particular to a second money of profit and profit and profit in a second money of
23.	CommitteesContributions to		
	Federal Candidates/Committees and Other Political Committees	50000	12 < 0 m
24	Independent Expenditures	LI SUPPO	1,05,0,0
24.	(use Schedule E)		
25.	Coordinated Party Expenditures		
	(2 U.S.C. §441a(d)) (use Schedule F)		
	(255 - 56.042.5 + 7		
26.	Loan Repayments Made		
	. ,		
27.	Loans Made		
28.	Refunds of Contributions To: (a) Individuals/Persons Other		
	Than Political Committees		
	(b) Political Party Committees		
	(c) Other Political Committees		
	(such as PACs)		
	40		•
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))▶		
20	Other Disbursements	3010	フェノン
25.	Other Disbursements	30,60	15,60
30	Federal Election Activity (2 U.S.C. §431(20))		
.	(a) Allocated Federal Election Activity		
	(from Schedule H6)		
	(i) Federal Share		
	(ii) "Levin" Share		
	(b) Federal Election Activity Paid Entirely		
	With Federal Funds		
	(c) Total Federal Election Activity (add	The state of the s	
	Lines 30(a)(i), 30(a)(ii) and 30(b)) ▶		
31.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	53060	1,325,60
00	Total Endard Dichurasments		
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)		
	1011 Line 01/		

(subtract Line 37 from Line 36)

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 5 **COLUMN A COLUMN B** III. Net Contributions/Operating Ex-**Total This Period** Calendar Year-to-Date penditures 33. Total Contributions (other than loans) (from Line 11(d), page 3) 34. Total Contribution Refunds (from Line 28(d))..... 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶ 37. Offsets to Operating Expenditures (from Line 15, page 3) 38. Net Operating Expenditures

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only

1		MBER	PAGE	F 3					
(check only one)								_	
١		11a		11b		11c		12	
ĺ		13		14		15		16	17

		Detailed Summary Page	1	11a 13	11b 14	11c 15	12	17
Any information copied from such Reports and Sta or for commercial purposes, other than using the								
NAME OF COMMITTEE (In Full)								
Association of Floral	Imp	orters of FL.	Pol	H200	l Activ	en C	ommi	Hee
Full Name (Last, First, Middle Initial) A. Sohn Johan S.				Date of	Receipt			
Mailing Address 4779 Collins City	Ap+.	IOOS Zip Code	_	0.6	1/23] ' [2	ÓÓ	8
Miami Beach	FL	33140			of Each F	-	is Period	
FEC ID number of contributing federal political committee.	C .						,50,	60
Name of Employer Sole Farms	Sales	~						
Receipt For: Primary General		Year-to-Date ▼						
Other (specify) ▼		<u> ۱۵٫۵۸ کی </u>						
Full Name (Last, First, Middle Initial) B				Date of	Receipt			
Mailing Address Ave.		4p+ 310		06	173	31'[3	600	8]
Miami Beach	State	Zip Code 33139		Amount	of Each F		is Period	
FEC ID number of contributing federal political committee.	C				4-0-1	-		
Name of Employer Sole Farms	Occupation	0						
Receipt For: Primary General	Aggregate	Year-to-Date ▼						
Other (specify) ▼		<u> </u>						
Full Name (Last, First, Middle Initial) C. Sabogal Daniel				Date of	Receipt			
Mailing Address U 1532 Luerga Aue	•			D6	17.6	1 B	ÓÓ	8
City Coral Gables	State	Zip Code 33146	}	Amount	of Each F		is Period	
FEC ID number of contributing federal political committee.	C .					2,0	00	OD
Grower 2 Buyer.	Occupation	. 1						
Receipt For: Primary	Aggregate	Year-to-Date ▼						
Other (specify) ▼					·			
SUBTOTAL of Receipts This Page (optional)	. •			3,3	00.	OO		
TOTAL This Period (last page this line number or	. •		. 					

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 2 OF 3 (check only one) 11a
Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and a NAME OF COMMITTEE (In Full) Association of Floral Im	ddress of any political committee t	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) A. Jordan Herbert Mailing Address 2750 NW 79 Aue City Miami FL FEC ID number of contributing federal political committee. Name of Employer The Queen's Flowers President Fore	Zip Code 33122	Date of Receipt Date of Receipt Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial) Mailing Address 5120 SW 76th St. City Miami FEC ID number of contributing federal political committee. Name of Employer Fesca Farms Receipt For: Primary X General	1 00	Date of Receipt Date of Receipt Amount of Each Receipt this Period Solution State

Other (specify)	1,5,00,00	
Full Name (Last, First, Middle Initial) Lozano Edger. Mailing Address 830 Lakeview Dr City City Beach FEC ID number of contributing	State Zip Code FL 33140	Date of Receipt OS 'SO'S Amount of Each Receipt this Period
Receipt For: Primary Other (specify)	Occupation President. Aggregate Year-to-Date LD.O.O.D.D.D.D.D.D.D.D.D.D.D.D.D.D.D.D.D	

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

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SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 3 OF 3
TEMIZED RECEIPTS	Use separate schedule(s) for each category of the	(check only one)
	Detailed Summary Page	11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Statements m or for commercial purposes, other than using the name and		rson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		
Association of Floral Impo	Hers Of Florida	Political Action Commite
Full Name (Last, First, Middle Initial) A. Pecerra Gabriel		Date of Receipt
Mailing Address SW 57th Path.		03 30 2008
City Miami FL State	Zip Code 33143	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		L. L. 500.00
Name of Employer Golden Flowers Pres	sident.	
Drimon: XX Compani	Year-to-Date ▼	
Other (specify) ▼	,,,,5,00,00	
Full Name (Last, First, Middle Initial)		Part of Parties
Mailing Address		Date of Receipt
5441 Banyan Dr.		05 30 2008
City Coral Gables FL	Zip Code 33 IS To	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.		
Name of Employer Occupation	A .	7
Continental Flowers Pres Receipt For: Accressed		4
Primary General	Year-to-Date ▼	
Other (specify) ▼	<u> 60,00,0,0</u>	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		
City State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing		Amount of Each Federal Wils Fellow
federal political committee.		
Name of Employer Occupation	1	
	Year-to-Date ▼	
Primary General Other (specify) ▼	0	
SUBTOTAL of Receipts This Page (optional)		2,500,00
TOTAL This Period (last page this line number only)		10,30,000

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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER.	PAGE OF		
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)		-	
	Detailed Summary Page	21b	22 23 28a 28b	24 25 28c 29	26 30b	
Any information copied from such Reports and States or for commercial purposes, other than using the nar	ments may not be sold or used ne and address of any political	by any personal to be committee to	on for the purpose of solicit contributions	of soliciting contributions from such committee.	s	
NAME OF COMMITTEE (In Full)	~ <i>~</i>		0 111	4 1 4		
Association of Floral Ir	nporters of M	lorida	tolitical	Action Con	mittee	
Full Name (Last, First, Middle Initial)			Date of Dishuma			
A. Lincoln Diaz-Balart fo	or Congress	•	Date of Disburse	ment	1	
Mailing Address	3		062	8 2008		
City Miami F	State Zip Code					
Purpose of Disbursement		miranitani				
Support for Re-Electronic Candidate Name			Amount of Each	Disbursement this Peri	od ====	
Lincoln Diaz-Balart	-	Category/ Type		<u>, ,500,0</u>	0	
Office Sought: House Disburset	ment For: Primary General					
President	Other (specify)					
State: District:						
Full Name (Last, First, Middle Initial) B.			Date of Disburse	ment		
			Mam / Los	<u> </u>		
Mailing Address					Ì	
City	State Zip Code					
Purpose of Disbursement						
Candidate Name			Amount of Each Disbursement this Period			
Cardidate Name		Category/ Type				
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Senate	Primary General Other (specify) ▼					
State: District:						
Full Name (Last, First, Middle Initial) C.			Date of Disburse	ement		
		MEMI / FOR				
Mailing Address			Í			
City	State Zip Code					
Purpose of Disbursement						
Candidate Name			Amount of Each	Disbursement this Peri	od	
		Category/ Type				
Office Sought: House Disburser Senate	ment For: Primary General				_ _	
President .	Other (specify) ▼					
State: District:						
SUBTOTAL of Disbursements This Page (optional)		>		5.000	0	
TOTAL This Period (last page this line number only)				5000	<u></u>	

(3/2005)

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt Hand Delivered Postmarked USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS Priority Mail** Delivery Confirmation™ or Signature Confirmation™ Label **Postmarked USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** DHL Overnight Delivery Service (Specify): Next Business Day Delivery **Date of Receipt** Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): **PREPARER** DATE PREPARED