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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)
Soriano, Gavriel, Eliyahu, ,

(b) Address (number and street) ☐ Check if address changed
12651 N Dale Mabry Hwy
PO Box 270026

2. Candidate's FEC Identification Number
H2FL11125

(c) City, State, and ZIP Code
Tampa FL 33688

3. Is This Statement ☐ New (N) **OR** ☒ Amended (A)

4. Party Affiliation	5. Office Sought	6. State & District of Candidate
REPUBLICAN PARTY	House	FL 14

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2026 (year of election) election(s).

NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full)
SORIANO FOR CONGRESS

(b) Address (number and street)
8624 CR 635

(c) City, State, and ZIP Code
BUSHNELL FL 33513

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

(b) Address (number and street)

(c) City, State, and ZIP Code

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

Signature of Candidate	Date
Soriano, Gavriel, Eliyahu, ,	01/28/2026

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