2024 Form 1 - Statement of Financial Interests

Filed with COE: 06/26/2025

General Information

Name: Marlon Luis

PID 202917

AGENCY INFORMATION

Organization	Suborganization	Title
Davie	Community Redevelopment Agency	Vice Chair
Davie	Mayor And Town Council	Councilmember

Disclosure Period

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2024.

Primary Sources of Income

PRIMARY SOURCE OF INCOME (Over $2,500) (Major sources of income to the reporting person)
(If you have nothing to report, write “none” or “n/a”)

Name of Source of Income	**Source's Address**	**Description of the Source's Principal Business Activity**
Biscayne Restoration	11860 W State Road 84, B-7, Davie, FL	General Contractor, Painting, Waterproofing, and Concrete Restoration
Town of Davie	8800 SW 36 Street, Davie, FL	Municipal Government

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Secondary Sources of Income

SECONDARY SOURCES OF INCOME (Major customers, clients, and other sources of income to businesses owned by the reporting person) (If you have nothing to report, write “none” or “n/a”)

Name of Business Entity	Name of Major Sources of Business' Income	Address of Source	Principal Business Activity of Source
Biscayne Restoration	Biscayne Restoration	11860 W State Road 84, B-7, Davie, FL	General Contractor
Biscayne Painting Corp.	Biscayne Painting Corp.	11860 W State Road 84, B-7, Davie, FL	GC Painting

Real Property

REAL PROPERTY (Land, buildings owned by the reporting person)
(If you have nothing to report, write “none” or “n/a”)

Location/Description
N/A

Intangible Personal Property

INTANGIBLE PERSONAL PROPERTY (Stocks, bonds, certificates of deposit, etc. over $10,000)
(If you have nothing to report, write “none” or “n/a”)

Type of Intangible	Business Entity to Which the Property Relates
N/A	

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Liabilities

LIABILITIES (Major debts valued over $10,000):
(If you have nothing to report, write “none” or “n/a”)

Name of Creditor	Address of Creditor
N/A	

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Interests in Specified Businesses

INTERESTS IN SPECIFIED BUSINESSES (Ownership or positions in certain types of businesses)
(If you have nothing to report, write “none” or “n/a”)

Business Entity # 1	
Name of Business Entity	Biscayne Restoration
Address of Business Entity	11860 W State Road 84, B-7, Davie, FL
Principal Business Activity	11860 W State Road 84, B-7, Davie, FL
Postion Held with Entity	President
I own more than a 5% Interest in the Business	Yes
Nature of my Ownership Interest	General Contractor
Business Entity # 2	
Name of Business Entity	Biscayne Painting
Address of Business Entity	11860 W State Road 84, B-7, Davie, FL
Principal Business Activity	11860 W State Road 84, B-7, Davie, FL
Postion Held with Entity	11860 W State Road 84, B-7, Davie, FL
I own more than a 5% Interest in the Business	Yes
Nature of my Ownership Interest	Painting and waterproofing

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Training

This section applies only to an appointed school superintendent, an elected municipal officer, elected local officer of an independent special district or a commissioner of a community redevelopment agency created under Part III, Chapter 163, each of whom are required to complete annual ethics training pursuant to Section 112.3142, F.S.

☑ I certify that I have completed the required training under Section 112.3142, F.S.

☐ Required training under Section 112.3142, F.S., not applicable to filer for this form year.

Signature of Filer

Marlon Luis

Digitally signed: **06/26/2025**

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