2025 Form 1 - Statement of Financial Interests

Filed with COE: 08/05/2026

General Information

Name: Javier E Fernandez

PID 277955

AGENCY INFORMATION

Organization	Suborganization	Title
South Miami	Mayor And City Commission	Mayor

CANDIDATE FOR

Position	Agency Name	Position sought or held
Mayor for a City, Town or Village - Form 1 (Effective 6/10/2024)	City of South Miami	Mayor

Disclosure Period

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2025.

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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
Javier E Fernandez Esq. P.A.	201 ALHAMBRA CIRCLE STE 1205 Coral Gables, Florida 33134	Law Firm
Fernandez Development Law PLLC	201 ALHAMBRA CIRCLE STE 1205 CORAL GABLES, FL 33134	Law Firm
City of South Miami	6130 Sunset Drive, South Miami, FL 33143	Municipal Government
Coreopsis Consulting LLC	201 Alhambra Circle, Ste. 1205, Coral Gables, FL 33134	Business Development & Consulting
EverBank	PO Box 44060, Jacksonville, FL 32231	Savings Account

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
N/A			

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

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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
Personal Savings Account	Bank of America
Business Savings Account	Bank of America
Business Savings Account	EverBank
SEP Account	Northwestern Mutual
Savings Account	Northwestern Mutual
Business Savings Account	United Community Bank

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	

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
N/A

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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

Javier E Fernandez

Digitally signed: **08/05/2026**

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