

General Information

Name: Hon Fabian Basabe

Address: 1666 KENNEDY CSWY STE 300, NORTH BAY VLG, FL 33141

PID 299847

County: Miami-Dade

AGENCY INFORMATION

Organization	Suborganization	Title
House Of Representatives	Elected Constitutional Officer	State Representative

Net WorthMy Net Worth as of December 31, 2022 was \$ 4,338,337.00.**Assets**

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, whether owned or leased.

The aggregate value of my household goods and personal effect is \$ 1,100,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
See attached	\$ 5,423,037.00
See Attached	

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
See attached	Sps	\$ 1,085,000.00
See Attached		

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

Name of Creditor	Address of Creditor	Amount of Liability
N/A		

Income

Identify each separate source and amount of income which exceeded \$1,000 during the year, including secondary sources of income.

☐ I elect to file a copy of my 2022 federal income tax return and all W2s, schedules, and attachments.

PRIMARY SOURCES OF INCOME:

Name of Source of Income Exceeding \$1,000	Address of Source of Income	Amount
Florida state house	400 South Monroe St.	\$ 3,551.75

SECONDARY SOURCES OF INCOME (Major customers, clients, etc. of businesses owned by reporting person):

Business Entity	Major Sources of Business Income	Address	Principal Business Activity of Source
N/A			

Interests in Specified Businesses**Business Entity # 1**

N/A

Training

- ☐ 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 Reporting Official or Candidate

Under the penalties of perjury, I declare that I have read the foregoing Form 6 and that the facts stated in it are true.

Fabian Basabe

Digitally signed: 07/03/2023

Filed with COE: 07/03/2023

Table 1

form6_assets_template	
Description of Asset	Value of Asset
159 NE. 45TH STREET MIAMI, FLORIDA 33137	\$663,365.00
4628 NW8TH AVENUE, MIAMI, FLORIDA 33127	\$341,349.00
301 NW54TH STREET MIAMI, FLORIDA33127	\$773,044.00
327 NW54TH STREET MIAMI, FLORIDA 33127	\$316,424.00
48 NW54TH STREET MIAMI, FLORIDA 33127	\$408,581.00
9 ISLAND AVENUE APT 2304 MIAMI BEACH, FLORIDA 33139	\$959,062.00
9 ISLAND AVENUE APT 2105 MIAMI BEACH, FLORIDA 33139	\$880,932.00
PERSONAL CHECKING ACCOUNT BANK OF AMERICA 12/21/23-01/21/24 STATEMENT	\$1,030,280.00
LOAN TO BLUEMOON HEMP DO TO ME	\$50,000.00
PART C LIABILITIES	
SELECT PORTFOLIO SERVICING, INC. POST OFFICE BOX 65250, SALT LAKE CITY, UT 84165	\$315,000.00
SELECT PORTFOLIO SERVICING, INC. POST OFFICE BOX 65250, SALT LAKE CITY, UT 84165	\$770,000.00