

2022 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 07/21/2023

General Information

Name: Rep Dotie Joseph

CONFIDENTIAL

Address: 735 NE 125th St, North Miami, FL 33161

PID 257851

County: Miami-Dade

AGENCY INFORMATION

Organization	Suborganization	Title
House Of Representatives	Elected Constitutional Officer	State Representative

Net Worth

My Net Worth as of December 31, 2022 was \$ 488,122.00.

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 \$ 10,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
Stocks/Bonds/Insurance (Kovack Securities, Fidelity, Robinhood, Equitable)	\$ 114,563.00
Pension (City of North Miami Beach	\$ 37,000.00
Deposit Accounts (Various Banks)	\$ 330,000.00
Deferred Compensation Plan (ICMARC Am Funds 2040)	\$ 111,122.63

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

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

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
Joseph Strategies	18117 Biscayne Blvd Ste 1227 Miami, FL 33160	\$ 67,000.00
State of Florida	200 East Gaines Street Tallahassee, FL 32399	\$ 29,697.00

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.

Dotie Joseph

Digitally signed: 07/21/2023

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