U.S. Department of Labor
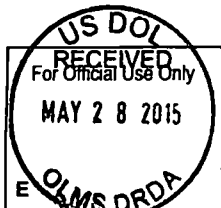Office of Labor-Management Standards
Washington, DC 20210

FORM LM-20
AGREEMENT AND ACTIVITIES REPORT

Form approved
Office of Management
and Budget
No. 1245-0003
Expires 08-31-2016

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This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440. Required of persons, including Labor Relations Consultants and Other Individuals and Organizations, Under Section 203(b) of the Labor-Management Reporting and Disclosure Act of 1959, as amended. (LMRDA)

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

593235

1. File Number: C- 00597

Person Filing

2. Name and mailing address (include ZIP Code):

Name: Carlos Restrepo

Title: President

Organization: Persuasive Communications Incorporated

P.O. Box, Bldg., Room No., if any:

Street: 1474 West Price Road # 7599

City: Brownsville

State: Texas   ZIP Code + 4: 78520

3. Any other address where records necessary to verify this report are kept:

Name:

Title:

Organization:

P.O. Box, Bldg., Room No., if any:

Street:

City:

State: ZIP Code + 4:

4. Date fiscal year ends: Dec / 31

5. Type of person:
a. ☐ Individual   b. ☐ Partnership   c. ☒ Corporation   d. ☐ Other (Specify):

Nature of Agreement or Arrangement

6. Full name and address of employer with whom made (include ZIP Code):

Name:

Organization: Starwoods Hotels

Trade Name, if any: W Hotel Boston

P.O. Box, Bldg., Room No., if any:

Street: 650 Liberty Avenue

City: Boston

State: Massachusetts   ZIP Code + 4: 07083

7. Date entered into: 2 / 1 / 2013

8. Name of person(s) through whom made:

Name: . Mary Jo   Morosco

Name:

Name:

Name:

Name:

Signatures

Each of the undersigned declares, under penalty of perjury and other applicable penalties of law, that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See *Section VII* on penalties in the instructions.)

13. Signed _[signature]_   President (If other title, see instructions)

Title: President

14. Signed _____   Treasurer (If other title, see instructions)

Title: Treasurer

On 4/30/15   310-8470384
Date   Telephone Number

On _____   _____
Date   Telephone Number

Form LM-20 (2003)

9. Check the appropriate box to indicate whether an object of the activities undertaken, is directly or indirectly:

a. ☐ To persuade employees to exercise or not to exercise, or persuade employees as to the manner of exercising, the right to organize and bargain collectively through representatives of their own choosing.

b. ☒ To supply an employer with information concerning the activities of employees or a labor organization in connection with a labor dispute involving such employer, except information for use solely in conjunction with an administrative or arbitral proceeding or a criminal or civil judicial proceeding.

10. Terms and conditions (Explain in detail; see instructions. Written agreements must be attached.):

Inform and educate employees, managers and supervisors regarding their rights duties and responsibilities under National Labor Relations Act and National Labor relations Board procedures

Specific Activities to be Performed

11. For each activity, separately list in detail the information required (See instructions):

a. Nature of activity:

Conducted group and indivdiual meetings with employees and managers

11.b. Period during which performed:	11.c. Extent performed:
2/1/2013-2/28/2013	Completed

11.d. Name and address through whom performed:

Name   Carlos   Restrepo

Organization   Persuasive Communications Inc.

P.O. Box, Bldg., Room No., if any

Street   1474 West Price Road # 7599

City   Brownsville

State   Texas   ZIP Code + 4   78520

Additional Name and address through whom performed, if any:

Name

Organization

P.O. Box, Bldg., Room No., if any

Street

City

State   ZIP Code + 4

12.a. Identify subject groups of employees:

Maintenance Employees

12.b. Identify subject labor organizations:

OEIU 4