Office of Labor-Management Standards Washington, Fig. 20210

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RECEIPTS AND DISBURSEMENTS REPORT

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

This report is mandatory under P.L. 88-257, 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 Relations and Disclosure Act of 1959, as amended. (LMRDA)



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

618919

4 52 4 675						
1. File Number C- 675	2. Period Covered By This Report From:	Month/Day/Yea (mm/dd/yyyy)	_	Month/Day/Year (mm/dd/yyy) 12 / 31 / 2015		
			Tillough:	12 / 31 / 2013		
A. Person Filing						
Name and mailing address (include ZIP Code):	T					
Name Jason Rodriguez	4. Any other address v	where records n	ecords necessary to verify this report are kept: L Rodriguez			
Title President / CEO	Title CFO		z kodrigue	9 2		
Organization Prestige Consulting Solutions LLC.	Organization Pres	lting Soluti	ons LLC.			
P.O. Box, Building and Room Number, if any 509 South Chickasaw Tr. #249	P.O. Box, Building a	and Room Numb	oom Number, if any			
Street City Orlando	1	Inut Crest	Dr			
State Florida ZIP Code + 4 32825	City Orlando State Florida ZIP Code + 4 32832					
Signa	itures					
Each of the undersigned declares, under penalty of perjury and other applicable penalti information contained in any accompanying documents) has been examined by the correct, and complete, (See the Section on penalties in the instructions).		ormation submitte	ed in this report (inclusing signed's knowledge	uding the and belief, true,		
17. Signed President (if other title, see	18. Signed	ap		Treasurer		
Title President (if other title, see instructions)	Title Treasu	rer		(If other title, see instructions)		
On 3/30/2016 907-373-3800 Date Telephone Number	on 3/30/5	2014 4	<u> </u>	875		
. Sophistic Number	Date	Tele	phone Number			
		}				

Ivame of I	Person F	Filing: VASAN	Kodi	riquel						File Number C-	くフく	
Q States		Described Described		<u>//</u>								
D. Staten		Receipts Report all or services.	receipts fro	m employers	in conne	ction w	rith labor rel	latio	ns advice or serv	ices regardless of th	e purpos	es of the advice
5.a. Name	and Add	iress of Employer (incl.	luding trade n					N	Mailing Address: Building and Room			
•		oya of Puerto					* **	G, G	oya of PR	n Number, II any		
l		Food Process	ing Pla	nt			Street	Ci	all Box 60-	1467		
Attenti	ion To	Remigio	N	lieves			City	Bi	ayamon			
Title		VP of HR					State	Pı	uerto Rico	ZII	P Code +	₊₄ 00960-6067
5.b. Termi			_				5.c. Am	ount	64,044.37			
6. TOTAL	RECEIP	PTS FROM ALL EMP	PLOYERS		#2	23	906.	9	0			
					,							
C. Stateme	ent of D	Disbursements R	Report all di	lisbursements o	made by	the rep	porting orga	aniza	ition in connection	n with labor relations	advice (or services rendered
(a) Name	ments to	Officers and Employe	ees:	(b) Salary	(c) Expen							7 SETTIONS TOTAL TO
Jason		Rodriguez	· · · · · · · · · · · · · · · · · · ·	20,000		0.01		10	20 Office and A	dministrative Expense		500.0
						-1	40 , ,	*09	10. Publicity	aministrative Expense	es	500.0
	======							7		fessional Services	-+	2500.0
								7	12. Loans Made	<u> </u>	-	2300.0.
								7	13. Other Disbur			
8. Total dist	burseme	ents to officers and e	employees:			26	9818	-		ements (Sum of Items	8-13)	3.000
			 -			-		£		1	<u>, </u>	3,000
D. Schedul	le of Dis	sbursements for Re	eportable /	Activity	Use this S	Schedu	ule to report	l only	y disbursements	made for the purpose	es descri	ibed in Part D of the
15.a. Emplo					-				Name, if any:			
Pres	stige ——	Consulting So	olutions	s LLC.						sulting Servi	Ces	
15.c. To Wh	hom Pai	ıd.							26,981.87	<u> </u>		
Name	Jε	ason	Rodi	riguez			15.d. Am	:ouni	20,301.6;			
Title	Pr	resident/CEO		-			15.e. Pur					
Organization Prestige Consulting solutions LLC.					To persuade employees as to the maker of exercising their right to organize and bargain collectively through representatives of their own choosing.							
P.O. Box	, Buildin	ng and Room Numbe	er, if any									
Street 50	09 So	uth Chickasaw	Tr #24	9								
	rlando			,								
· ,	lorida		ZIP	Code + 4 32	2825							
6. TOTAL (DISBUR	RSEMENTS FOR AL			/ITY •					<u> </u>		
			the real cases	ABLE AUTT	#1	22	944.	4	' A			
				——— <u> </u>	<u>~</u>		/ · · ·			<u> </u>		

Name of Person Filing: VASON Radriquez				
VASON FOURI JUEZ	File Number C- 675			
B. Statement of Receipts Report all receipts from employers in connection with				
B. Statement of Receipts Report all receipts from employers in connection wit or services.	th labor relations advice or servi	ces regardless of the purpo	ses of the advice	
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address:	dress:		
Employer Jose Santiago Inc.	P.O. Box, Building and Room Number, if any Jose Santiago Inc.			
Trade Name Food Distribution	Street P.O. Box 1917			
Attention To Jose E Santiago	City San Juan			
Title Corporate Attorney	State Puerto Rico 719 Codo : 4 00919-1795			
	Sidle Puerto RICO	ZIP Code	+4 00919-1795	
5.b. Termination Date 10/7/2015	5.c. Amount 56,509.97	· · · · · · · · · · · · · · · · · · ·		
6. TOTAL RECEIPTS FROM ALL EMPLOYERS				
C. Statement of Disbursements Report all disbursements made by the	<u></u>			
C. Statement of Disbursements Report all disbursements made by the report to the employers listed in Part B.	orting organization in connection	with labor relations advice	or services rendered	
7. Disbursements to Officers and Employees:				
(b) Salary (c) Expenses (d)				
Rodriguez 30150.00 4488.42 Cesar Lopez 8900.00 4071.55		Iministrative Expenses	400.00	
/-	2,92/55 10. Publicity			
	12. Loans Made	fessional Services	2500.00	
	13. Other Disburs	sements		
8. Total disbursements to officers and employees:	447 64	ments (Sum of Items 8-13)	HADAAO	
		(# J,700.	
D. Schedule of Disbursements for Reportable Activity Use this Schedule	- 4 4 1 1			
instructions.	e to report only disbursements n	nade for the purposes desc	ribed in Part D of the	
15.a. Employer Name: Prestige Consulting Solutions LLC.	15.b. Trade Name, If any:			
Solutions LLC.	Management Cons	sulting Services		
15.c. To Whom Paid	15.d. Amount 47,609.97		-	
Name Jason Rodriguez	15.e. Purpose			
Title President/CEO	To persuade employe	es as to the maker	of	
Organization Prestige Consulting solutions LLC.	exercising their right to organize and bargain collectively through representatives of their own choosing.			
P.O. Box, Building and Room Number, if any				
			· ·	
Street 509 South Chickasaw Tr #249		1		
City Orlando				
State Florida ZIP Code + 4 32825				
6. TOTAL DISBURSEMENTS FOR ALL REPORTABLE ACTIVITY				
\$150	962,53 See	Other Pag	ي	

Name of Person Filing:	1.				<u> </u>		
Name of Person Filing: JISON ROC	riquez	<u> </u>			File Number C- 67	5	
B. Statement of Receipts Report all receipts for	om employem	in communation	***				
B. Statement of Receipts Report all receipts from or services.		in connection	with labor relati	ons advice or serv	rices regardless of the purp	ooses of the advice	
5.a. Name and Address of Employer (including trade name, if any). Employer Adecco Group NA			P.O. Box,	Mailing Address: Building and Room	Number, if any		
Trade Name Temporary Employmen	t Acency			Adecco Group	ł		
AU 11 - 7.55				od Park Bldg. 200 Suite 4(
-	latson		City	Jacksonville			
Title Corporate Attorney			State	Florida	ZIP Cod	_{le+4} 32256	
5.b. Termination Date 8/20/2015			5.c. Amou	nt 103.352.56	<u> </u>		
6. TOTAL RECEIPTS FROM ALL EMPLOYERS					<u> </u>		
							
C. Statement of Disbursements Report all d					t .		
	lisbursements oyers listed in	made by the n Part B.	eporting organi	zation in connection	n with labor relations advic	ce or services rendered	
7. Disbursements to Officers and Employees: (a) Name	6) O. I						
Jason Rodriguez	(b) Salary 40,000	(c) Expenses (
Miriam Navarro	20,000	4268.26	77136.1		dministrative Expenses	550.00	
Charles R Stephenson	27,500	4428.01	268.20				
			51, 12 70	11. Fees for Pro	fessional Services	2500.00	
				13. Other Disbu			
8. Total disbursements to officers and employees	:	BIO	3,352.56				
		717	2, 22 d.26	14. 1001 Disours	i (Sum of items 8-13)	\$ 3050.00	
D. Schedule of Disbursements for Reportable	A - 22- 22-						
	ACTIVITY	Use this Schedinstructions.	dule to report or	nly disbursements	made for the purposes de	scribed in Part D of the	
15.a. Employer Name:			15.b. Trade	e Name, If any:			
Prestige Consulting Solution	s LLC.		ı		sulting Services		
15.c. To Whom Paid			15 d Amou	int 47,156.29			
Name Jason Rod	riguez						
Title President/CEO To persuade employ					es as to the make		
Organization Prestige Consulting solutions LLC.				To persuade employees as to the maker of exercising their right to organize and bargain collectively through representatives of their own choosing.			
P.O. Box, Building and Room Number, if any							
Street 509 South Chickasaw Tr #24	9						
City Orlando							
State Florida ZIF	Code + 4 32	2825					
6. TOTAL DISBURSEMENTS FOR ALL REPOR	TABLE ACTIV	ITY .			<u> </u>		
		#103:	752.56	See 1	ther lages		
TN LM-21 (2003)			40.100		10985		