



NORTH BROWARD HOSPITAL DISTRICT (NBHD) DBA BROWARD HEALTH LOBBYING REGISTRATION FORM

(SEE BACK FOR INSTRUCTIONS)

For what purpose are you using this form?

New Registration Change to Profile Renewal

To which fiscal year does this form apply? 20 24-25

LOBBYIST:

Last Name: GUERRA First Name: Adriana Middle: _____
 Mailing Address: 5025 NW 189th Ter Miami Gardens, FL 33055
adriana.guerra@spineoshealth.com
 Email Address: _____
 Office Number: _____ Cell Number: 786-488-0606

Spineos Health representing tenure
 Lobbying Firm on behalf of which lobbyist is representing principal (if any)

Lobbying Firm's Mailing Address

786-488-0606
 Telephone Number

Do you have any direct or indirect business association, partnership, or financial relationship or live in the same household with or are related to any Broward Health Board Member, Board Committee Member, employee, or agent?

No Yes. State with whom and explain: _____

Have you ever been an employee of Broward Health?

No Yes,

Title _____ Date of Employment _____ Date of Separation _____

Have you ever served as an NBHD Commissioner or on a Commission Sub-Committee?

No Yes,

Date of Service _____ Date of Separation _____

OATH

I do solemnly swear that all the foregoing facts are true and correct.

[Signature]

Original Signature of Lobbyist

Provide the names, business address, telephone number and area of interest of each principal represented.

PRINCIPAL #1 Principal Name

Spineos Health representing tenure

Principal Mailing Address _____

786-488-0606
 Principal Telephone Number

Pharmaceuticals
 Areas of Interest/General & Specific Subject Matter

PRINCIPAL #2 Principal Name

N/A

Principal Mailing Address _____

Principal Telephone Number _____

Areas of Interest/General & Specific Subject Matter _____

PRINCIPAL #3 Principal Name

N/A

Principal Mailing Address _____

Principal Telephone Number _____

Areas of Interest/General & Specific Subject Matter _____

STATE OF FLORIDA

COUNTY OF MIAMI-DADE

Sworn to (or affirmed) and subscribed before me this 25 day of JUNE, 2024 by ADRIANA GUERRA

[Signature]

(Signature of Notary Public--State of Florida)



LUIGI SAIEH

Commission # HH 121576

Expires July 10, 2025

Bonded Thru Budget Notary Services

(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known _____ OR Produced Identification

Type of Identification Produced FL Driver License