



Florida Commission on Ethics
P.O. Drawer 15709, Tallahassee, Florida 32317-5709
"A Public Office is a Public Trust"

FLORIDA
COMMISSION ON ETHICS

FEB 06 2026

COMPLAINT

26-034 AMENDMENT

RECEIVED

ORIGINAL

1. PERSON BRINGING COMPLAINT:

Name: Claudia B Zuco Telephone: _____
Address: 1342 Stallone Court
City: Kissimmee County: Osceola State: FL ZIP: 34744

2. PERSON AGAINST WHOM COMPLAINT IS BROUGHT:

Use a separate complaint form for each person against whom you are filing a complaint.

Name: Jackie Espinosa Telephone: _____
Address: 101 Church Street
City: Kissimmee County: Osceola State: FL ZIP: 34741
Title of office or position held or sought: Mayor

3. STATEMENT OF FACTS:

Please provide a full explanation of your complaint, describing the facts and the actions of the person named above and why you believe he or she violated the law, and include a statement of how you became aware of these facts. Include relevant dates and the names and addresses of people whom you believe may be witnesses. Please do not submit more than 15 pages, including this form. Please do not submit video or audio tapes, CD, DVDs, flash drives, or other electronic media; such material will not be considered part of the complaint and will be returned.

4. OATH:

I, the person bringing this complaint, do swear or affirm that the facts set forth in the foregoing complaint and attachments thereto are true and correct to the best of my knowledge and belief.

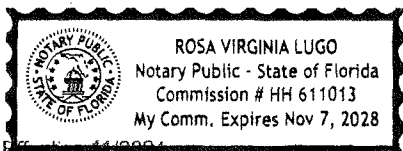
STATE OF Florida
COUNTY OF Osceola

Sworn to (or affirmed) and subscribed before me by
means of ☒ physical presence or ☐ online notarization,
this 2nd day of February, 20 26,
by Claudia Beatriz Zuco
(name of person making statement)

[Signature]
SIGNATURE OF COMPLAINANT

[Signature]
(Signature of Notary Public)

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



Personally Known _____ OR Produced Identification ☒
Type of Identification Produced: POL 2200-106-68-5840

2026 03/04/2028

Claudia Zuco
1342 Stallone Court
Kissimmee, Fl 34744

February 1, 2026

Florida Commission on Ethics
P.O. Drawer 15709
Tallahassee, Florida 3217-5709

RE: Amendment to Formal Complaint 26-034

Dear Commisioners,

I am writing to formally request an amendment to my pending complaint against Mayor Eva "Jackie" Espinosa (Ref. No. 26-034) to incorporate the enclosed evidence. These documents demonstrate that Mayor Espinosa was an active participant in applying for the Business Boost 2.0 program, a fact that was omitted from the original filing.

I obtained this evidence through a public records request I submitted to the City of Kissimmee (PRR2025-1610) on November 5, 2025. While I informed Lillian Evans of the misconduct via social media on December 2, 2025, she filed the complaint on January 11, 2026, without the full evidence I had secured and without providing me an opportunity to review the final claims. The attached materials—including a hardship affidavit for Adanse LLC, a COVID-19 impact form, and a New Vendor Packet—provide critical evidence of the Mayor's active role in securing grant funds for her business interests.

This evidence supports the claim of a voting conflict pursuant to Fla. Stat. § 112.314(3), as it inurs a "special gain" for the Mayor and her businesses and family when they secured multiple grants while other applicants were denied. Furthermore, the records indicate a failure to disclose a conflict of interest or abstaintion from proceedings. There is no record of a filing of a memorandum of conflict (Form 8B) following the completion of the hardship letter or the New Vendor Packet for Adanse by Mayor Espinosa or the Kissimmee Diner or the The

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Real Estate Gallery all of which were sworn and affirmed in front of the same Notary Public, Cecilia Gonzalez on October 27, 2025. Just as all three Vendor Authorizations are dated October 25, 2025. This gives much more weight to the statements made by, City Attorney Olga Sanchez de Fuentes in an email on December 5, 2025, that receiving these funds would create a "prohibited, conflicting contractual relationship" under Fla. Stat. § 112.313(3) and § 112.313(7), in an email which I obtained through a different public records request to the City of Kissimmee (PRR2026-81) on January 23, 2026. Each New Vendor Packet submitted cemented the contractual and financial relationship between the various Espinosa businesses and the City of Kissimmee which clearly created the "prohibited, conflicting contractual relationship" under Fla. Stat. § 112.313(3) and § 112.313(7).

And as all three Affidavits are notarized on the same day, October 27, 2025, by the same notary, Cecelia Gonzalez and each of the three Vendor Authorization Agreement For Electronic Funds Transfer (DEPOSIT) are dated on the same date of October 25, 2025, it is absolutely reasonable to assume that all three grants applications were submitted by the Espinosa's simultaneously.

Please find the following exhibits enclosed for your review:

- **Exhibit A:** Hardship Letter signed by Eva Espinosa.
- **Exhibit B:** COVID Impact submission for Adanse LLC.
- **Exhibit C (1-3):** New Vendor Packet, including a sworn affidavit signed by Eva Espinosa in the presence of a notary on 10/27/2025 (C-2) and an electronic fund transfer authorization dated 10/25/2025. (C-3)
- **Exhibit D (1-3):** New Vendor Packet, for The Real Estate Gallery LLC , including a sworn affidavit signed by Jorge Espinosa in the presence of a notary on 10/27/2025 (D-2) and an electronic fund transfer authorization dated 10/25/2025. (D-3)
- **Exhibit E (1-3):** New Vendor Packet Kissimmee Diner, including a sworn affidavit signed by Jorge Espinosa in the presence of a notary on 10/27/2025 (E-2) and an electronic fund transfer authorization dated 10/25/2025. (E-3)

Thank you for your time and attention to this amendment.

Sincerely,
Claudia Zuco

A2

Hardship letter:

Adanse, LLC.

Please note the following income trend:

2019 = \$63,812

2020 = \$103,645 We started with an upward trend, we were set to make close to 250K in sales for the company but then COVID.

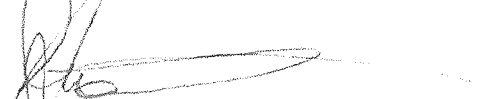
2021 = \$57,348 Reflecting almost a 50% decrease in sales

2022 = \$87,679 we started climbing our way back to a better sales scenario

2023 = \$202,826 Almost making our goal to pre covid scenario

2024 = \$133,172 Once again feeling the affects of the aftermath as we invested in marketing and select items and added our catering options.

The marketing for this type of company is crucial and this grant will certainly allow us the opportunity to do just that.



Eva Espinosa, MGR.

A3

(A)

C. COVID-19 Impact

Case Id: 31059

Name: Adanse, llc - 2025

Completed by info@kissimneediner.com on 9/17/2025 8:48 PM

Address: 17-19 Broadway Avenue, Kissimmee, FL 34741

C. COVID-19 Impact

Please provide the following information.

C.1. Was your business negatively impacted by COVID-19?

Yes

C.2. How was your business impacted by COVID-19? Please specify the revenue loss per calendar year from 2019 through December 30, 2024.

We are an entertainment company, we have produced events for many years such as weddings, dance competitions an international and national levels. Covid did not allow for any events and the recovery of it has been challenging. Dance events which requires couples dancing became a distant sport. Event venues limited our services, additionally, we now require different level of protection for set up and alot more disinfecting processes. After Covid we continue to practice safer practices for the safety or our patrons, hence resulting in many more expenses.

C.3. How are the effects of COVID-19 still negatively impacting your business?

Yes, we had to reduce our size of attendees, creating smaller events and creating a bigger sense of personal hygiene. We have also had the need for more disposable items to prevent the spread of germs. Many families are fearful of large groups and also prefer outdoor spaces as opposed to our indoor, contained space. Our services have been reduced and we have opted to include more marketing to local groups as opposed to the destination weddings we were starting to attract prior to COVID.

C.4. Describe any steps you have taken to recover from these impacts.

Marketing, social media marketing. Email campaigns. Smaller packages for the prospective clients. Senior events that require more attendants but keeps the phones ringing. Hired two new event coordinators that will accomodate outside of our standard packages. We have expanded our travel policies to include Orange and Seminole counties.

C.5. Explain how this grant will help your business recover or stabilize.

It will allow us to expand our marketing area reach. It will also allow us to purchase renewed items or updated linens and decor. We have recycled plenty of our things, but we have to wash items over and over again and never use anything more than once. It will also allow us to purchase a vehicle wrap which will allow us to promote better.

C.6. Provide any additional information about your financial hardship.

We did obtain a loan for 16K from the SBA and we are currently under deferment. This all occured under the EIDL loan period

CITY OF
KISSIMMEE
1883

NEW VENDOR REQUEST

(Please forward completed form with W-9 to Purchasing
and completed EPayable or EFT Enrollment Form)

Vendor Name Adanse LLC

Vendor Address 17-19 Broadway

City Kissimmee ST FL Zip 34741

Commodity Events and Entertainment

Remit To Address 17-19 Broadway

City Kissimmee ST FL Zip 34741

Contact Eva Jacquelyn Espinosa

Phone Number Current Commissioner's Partial Home
Address / Telephone Numbers

Fax Number _____

Requestor: _____

Department: _____ Phone _____

Requisition Number: _____



W-9 Form Must Be Attached

COK- FINANCE-VNDREQ(APRIL 2019) rev

EPayable



EFT



A5

C-1

AFFIDAVIT

Before me, a notary public, in and for the State of Florida – at large,
personally appeared, Eva J Espinosa, and having first made due oath or affirmation,
states: (Write Name Here)

1. My name is Eva J Espinosa
(Write Name Here)

2. I am the owner of Adanse LLC
(Insert Job Title) (Insert Company Name)

3. The Company was formed in 02/2017 and is a LLC
(Country and State) (List the Type of Entity (ex.: LLC, Inc., etc.))

4. I am duly authorized and empowered and have sufficient knowledge to execute and deliver this Affidavit.

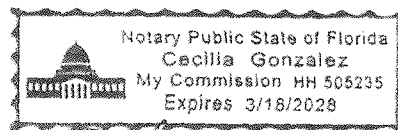
5. I affirm that the Company is not:

- a. Owned or controlled by the government of the People's Republic of China, the Russian Federation, the Islamic Republic of Iran, the Democratic People's Republic of Korea, the Republic of Cuba, the Venezuelan regime of Nicolás Maduro, or the Syrian Arab Republic (collectively and individually, a Foreign Country of Concern), including any agency of or any other entity of significant control of such Foreign Country of Concern. Where 'controlled by' means *having possession of the power to direct or cause the direction of the management or policies of a company, whether through ownership of securities, by contract, or otherwise; or a person or entity that directly or indirectly has the right to vote 25 percent or more of the voting interests of the company or that is entitled to 25 percent or more of its profits is presumed to control the foreign entity; or*
- b. A partnership, association, corporation, organization, or other combination of persons organized under the laws of or having its principal place of business in a Foreign Country of Concern, or a subsidiary of such entity.

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

(Signature of Affiant)

The foregoing instrument was acknowledged before me this 27th day of October,
2025, by Eva J Espinosa.
(Insert Year) (Insert Name of Affiant)



Personally known _____
OR Produced Identification driver license
Type of Identification Provided _____

(Signature of Notary)
PRINT, TYPE OR STAMP NAME OF NOTARY

ALG C-8



VENDOR AUTHORIZATION AGREEMENT FOR ELECTRONIC FUNDS TRANSFER (DEPOSIT)

I hereby authorize The City Of Kissimmee to initiate deposit entries to my checking/saving account indicated below.

A PRENOTIFICATION WILL BE SENT TO YOUR BANK FOR THE FIRST PAYMENT AND YOU WILL RECEIVE A REGULAR CHECK - THEREAFTER FUNDS WILL BE DEPOSITED DIRECTLY INTO YOUR ACCOUNT

This authority is to remain in full force and effect until The City Of Kissimmee has received written notification from the vendor of its termination, in such time and in such manner as to afford the company a reasonable opportunity to act on or until The City Of Kissimmee has sent me ten (10) days written notice of The City Of Kissimmee's termination of the agreement.

VENDOR NAME	Adanse LLC	DATE	10/25/2025
REMIT TO ADDRESS	19 Broadway		
CITY	Kissimmee, FL 34741	STATE	FL ZIP 34741
CONTACT NAME	Eva J Espinosa	PHONE #	Current Commissioner's
EMAIL ADDRESS	info@jaslene.com (Required for notification of funds deposited to your account and listing of invoices paid)		
TAX PAYER ID #	Tax Information / Federal		
SIGNATURE			
BANK RE:	SOUTHSTATE		
BANK ADDRESS	349 w. Oak Street		
CITY	Kissimmee	STATE	FL ZIP 34741 PHONE # 407.847.3800
ACH ROUTING NUMBER	Tax Information / Federal		
ACCOUNT NUMBER	Bank Account Information		

ADANSE LLC
19 BROADWAY
KISSIMMEE FL 34741

6010

PAY TO THE
ORDER OF

\$

DOLLARS

COK-

 **SOUTH STATE**
BANK

Bank Account Information

VENDOR #
ENTERED BY:
Date:

A7

C-3

CITY OF
KISSIMMEE
1883

NEW VENDOR REQUEST

(Please forward completed form with W-9 to Purchasing
and completed EPayable or EFT Enrollment Form)

Vendor Name The Real Estate Gallery LLC

Vendor Address 120 Broadway

City Kissimmee ST FL Zip 34741

Commodity REAL ESTATE - PROPERTY MANAGEMENT

Remit To Address 120 Broadway SUITE 201

City Kissimmee ST FL Zip 34741

Contact Jorge Espinosa

Phone Number Current Commissioner's Partial
Home Address / Telephone

Fax Number

Requestor:

Department: Phone

Requisition Number:



W-9 Form Must Be Attached

COK-FINANCE-VNDREQ(APRIL 2019) rev

EPayable



EFT



A8
D-1

AFFIDAVIT

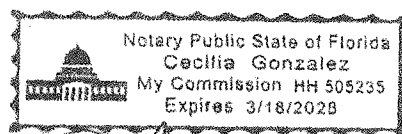
Before me, a notary public, in and for the State of Florida – at large,
personally appeared, Jorge E Espinosa, and having first made due oath or affirmation,
states: (Write Name Here)

1. My name is Jorge E Espinosa
(Write Name Here)
2. I am the owner of The People's Palace Gallery LLC
(Insert Job Title) (Insert Company Name)
3. The Company was formed in 01/2014 and is a LLC
(Country and State) (List the Type of Entity (ex.: LLC, Inc., etc.))
4. I am duly authorized and empowered and have sufficient knowledge to execute and deliver this Affidavit.
5. I affirm that the Company is not:
 - a. Owned or controlled by the government of the People's Republic of China, the Russian Federation, the Islamic Republic of Iran, the Democratic People's Republic of Korea, the Republic of Cuba, the Venezuelan regime of Nicolás Maduro, or the Syrian Arab Republic (collectively and individually, a Foreign Country of Concern), including any agency of or any other entity of significant control of such Foreign Country of Concern. Where 'controlled by' means *having possession of the power to direct or cause the direction of the management or policies of a company, whether through ownership of securities, by contract, or otherwise; or a person or entity that directly or indirectly has the right to vote 25 percent or more of the voting interests of the company or that is entitled to 25 percent or more of its profits is presumed to control the foreign entity; or*
 - b. A partnership, association, corporation, organization, or other combination of persons organized under the laws of or having its principal place of business in a Foreign Country of Concern, or a subsidiary of such entity.

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

(Signature of Affiant)

The foregoing instrument was acknowledged before me this 27th day of October,
2025, by Jorge E Espinosa.
(Insert Year) (Insert Name of Affiant)



Personally known _____
OR Produced Identification driver license
Type of Identification Provided _____

PRINT, TYPE OR STAMP NAME OF NOTARY

A9
D-2



VENDOR AUTHORIZATION AGREEMENT FOR ELECTRONIC FUNDS TRANSFER (DEPOSIT)

I hereby authorize The City Of Kissimmee to initiate deposit entries to my checking/saving account indicated below.

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This authority is to remain in full force and effect until The City Of Kissimmee has received written notification from the vendor of its termination, in such time and in such manner as to afford the company a reasonable opportunity to act on or until The City Of Kissimmee has sent me ten (10) days written notice of The City Of Kissimmee's termination of the agreement.

VENDOR NAME	The Real Estate Gallery LLC		DATE	10/25/2025
REMIT TO ADDRESS	120 Broadway suite 201			
CITY	Kissimmee, FL 34741	STATE	FL	ZIP 34741
CONTACT NAME	Jorge E Espinosa	PHONE #	407.963.8816	
EMAIL ADDRESS	info@realestate-gallery.com			
(Required for notification of funds deposited to your account and listing of invoices paid)				
TAX PAYER ID #	Tax Information /			
SIGNATURE				
BANK RE:	SOUTHSTATE			
BANK ADDRESS	349 w. Oak Street			
CITY	Kissimmee	STATE	FL	ZIP 34741 PHONE #407.847.3800
ACH ROUTING NUMBER	Bank Account Information			
ACCOUNT NUMBER	Bank Account Information			

The Real Estate Gallery, LLC.
120 Broadway Avenue Suite 201
Kissimmee, FL 34741
407-963-7710

1193

63-1403/631

Pay to the
Order of

\$

Dollars

CenterState Bank

Kissimmee, FL 34741

For

A10

D-3

CITY OF
KISSIMMEE
1883

NEW VENDOR REQUEST

(Please forward completed form with W-9 to Purchasing
and completed EPayable or EFT Enrollment Form)

Vendor Name Kissimmee Diner

Vendor Address 120 Broadway

City Kissimmee ST FL Zip 34741

Commodity Restaurant

Remit To Address 120 Broadway Suite 103

City Kissimmee ST FL Zip 34744

Contact Jorge E Espinosa

Phone Number 407.963.8816

Fax Number _____

Requestor: _____

Department: _____ Phone _____

Requisition Number: _____



W-9 Form Must Be Attached

EPayable



EFT



COK- FINANCE-VNDREQ(APRIL 2019) rev

ALL
E-1

AFFIDAVIT

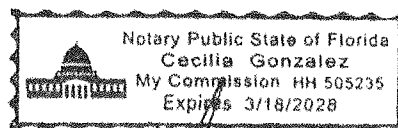
Before me, a notary public, in and for the State of Florida – at large,
personally appeared, Jorge E Espinosa, and having first made due oath or affirmation,
states: (Write Name Here)

1. My name is Jorge E Espinosa
(Write Name Here)
2. I am the owner of Kissimmee Diner Inc.
(Insert Job Title) (Insert Company Name)
3. The Company was formed in 09/2017 and is a Inc
(Country and State) (List the Type of Entity (ex.: LLC, Inc., etc.))
4. I am duly authorized and empowered and have sufficient knowledge to execute and deliver this Affidavit.
5. I affirm that the Company is not:
 - a. Owned or controlled by the government of the People's Republic of China, the Russian Federation, the Islamic Republic of Iran, the Democratic People's Republic of Korea, the Republic of Cuba, the Venezuelan regime of Nicolás Maduro, or the Syrian Arab Republic (collectively and individually, a Foreign Country of Concern), including any agency of or any other entity of significant control of such Foreign Country of Concern. Where 'controlled by' means *having possession of the power to direct or cause the direction of the management or policies of a company, whether through ownership of securities, by contract, or otherwise; or a person or entity that directly or indirectly has the right to vote 25 percent or more of the voting interests of the company or that is entitled to 25 percent or more of its profits is presumed to control the foreign entity; or*
 - b. A partnership, association, corporation, organization, or other combination of persons organized under the laws of or having its principal place of business in a Foreign Country of Concern, or a subsidiary of such entity.

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

(Signature of Affiant)

The foregoing instrument was acknowledged before me this 27th day of October,
2025, by Jorge E. Espinosa.
(Insert Year) (Insert Name of Affiant)



Personally known _____
OR Produced Identification driver license
Type of Identification Provided _____

PRINT, TYPE OR STAMP NAME OF NOTARY

A12

E-2



VENDOR AUTHORIZATION AGREEMENT FOR ELECTRONIC FUNDS TRANSFER (DEPOSIT)

I hereby authorize The City Of Kissimmee to initiate deposit entries to my checking/saving account indicated below.

A PRENOTIFICATION WILL BE SENT TO YOUR BANK FOR THE FIRST PAYMENT AND YOU WILL RECEIVE A REGULAR CHECK - THEREAFTER FUNDS WILL BE DEPOSITED DIRECTLY INTO YOUR ACCOUNT

This authority is to remain in full force and effect until The City Of Kissimmee has received written notification from the vendor of its termination, in such time and in such manner as to afford the company a reasonable opportunity to act on or until The City Of Kissimmee has sent me ten (10) days written notice of The City Of Kissimmee's termination of the agreement.

VENDOR NAME	Kissimmee Diner, Inc	DATE	10/25/2025
REMIT TO ADDRESS	120 Broadway suite 103		
CITY	Kissimmee, FL 34741	STATE	FL ZIP 34741
CONTACT NAME	Jorge E Espinosa	PHONE #	407.963.8816
EMAIL ADDRESS	info@kissimmediner.com (Required for notification of funds deposited to your account and listing of invoices paid)		
TAX PAYER ID #	Tax Information /		
SIGNATURE			
BANK	RE: SOUTHSTATE		
BANK ADDRESS	349 w. Oak Street		
CITY	Kissimmee	STATE	FL ZIP 34741 PHONE # 407.847.3800
ACH ROUTING NUMBER	Bank Account Information		
ACCOUNT NUMBER	Bank Account Information		

**KISSIMMEE DINER, INC.
MATADOR TACOS & TAPAS**

(407)963-8816
120 BROADWAY, SUITE 101 103
KISSIMMEE, FL 34741

211344

63 1403/631

PAY TO THE ORDER OF

PAY TO THE ORDER OF

13

WHAT A TIME TO BE ALIVE... DOLLARS @ 100

CENTER STATE BANK

A13

E-3