

1995


$$\begin{aligned} \frac{1}{2} &= \frac{1}{2} \cdot \frac{1}{2} = \frac{1}{4} \\ \frac{1}{4} &= \frac{1}{4} \cdot \frac{1}{2} = \frac{1}{8} \\ \frac{1}{8} &= \frac{1}{8} \cdot \frac{1}{2} = \frac{1}{16} \\ \frac{1}{16} &= \frac{1}{16} \cdot \frac{1}{2} = \frac{1}{32} \end{aligned}$$

APPROVED
AND
FILED

TIGER EYE INTERNATIONAL CORP.

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

PEGIRO INC
2880 SW 58TH AVE
MIAMI FL 33155

[illegible]

9. Name and Address of Current Registered Agent

PEGIRO, INC
2880 SW 58TH AVE
MIAMI FL 33155

81 $\frac{1}{2} \log 2$

82 $\log 2$

83 $\log 2$

84 $\log 2$

85 $\log 2$

[illegible]

12. P
RAIA, ALDO R
10155 COLLINS AVE #301
MIAMI BCH FL
D
RAIA, SUMAIA L
10155 COLLINS AVE #301
MIAMI BCH FL
D
LABAKI, VIRGINIA H
10155 COLLINS AVE #301
MIAMI BCH FL
Secretary
Beverly, Virginia
2880 SW 58 Ave
Hollywood, FLA 33015

[illegible]

SIGNATURE:

SIGNATURE AND TITLE OF PRINTED NAME OF ISSUING OFFICE IN FULL CAPS

4/30/95 (30) 661 2376

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
JAMES H. MATHIAS
GOVERNOR

APPROVED
AND
FILED

MAY 10 1995

OFFICE OF STATE
TREASURER, FLORIDA

DOCUMENT # **P93000087154 (9)**

JADE INTERNATIONAL CORP.

1. Principal Office		2a. Mailing Address		3. Date of Incorporation		3a. Date of Incorporation	
% PEGIRO INC 2880 SW 58TH AVE MIAMI FL 33155		% PEGIRO INC. 2880 SW 58TH AVE MIAMI FL 33155		12/21/1993		04/29/1994	
2. Principal Office		2a. Mailing Address		4. Filer Number		4a. Filer Number	
21. 10155 COLLINS AVE		26. State		APPLIED FOR 65-0455883		Applied For	
22. # 301		27. City		5. Certificate of Status Desired		\$8.75 Additional Fee Required	
23. Miami Beach, FL		28. State		6. Election Campaign Financing		\$5.00 May Be Added to Fees	
24. 33156		25. USA		29.		30.	
26. State		27. City		6. Election Campaign Financing		\$5.00 May Be Added to Fees	
28. State		29.		7. This corporation has submitted to the Department of State for filing its		8. This corporation has submitted to the Department of State for filing its	
29.		30.		7. This corporation has submitted to the Department of State for filing its		8. This corporation has submitted to the Department of State for filing its	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
PEGIRO, INC 2880 SW 58 AVE. MIAMI FL 33155				81. Name			
				82. Street Address, if Different from 81			
				83.			
				84. State			
				FL 85.			

11. The undersigned hereby certifies that the information furnished herein is true and correct to the best of their knowledge and belief, and that the information furnished herein is true and correct to the best of their knowledge and belief, and that the information furnished herein is true and correct to the best of their knowledge and belief.

12. SIGNATURE OF OFFICER OR DIRECTOR		13. SIGNATURE OF SECRETARY	
P RAIA, ALDO R 10155 COLLINS AVE. #301 MIAMI BEACH FL 33156			
D RAIA, SUMAIA L 10155 COLLINS AVE. #301 MIAMI BEACH FL 33156			
D LABAKI, VIRGINIA 10155 COLLINS AVE. #301 MIAMI BEACH FL 33156			
Secretary Georgina Beebe 2880 SW 58 AVE MIAMI, FL 33155			

14. The undersigned hereby certifies that the information furnished herein is true and correct to the best of their knowledge and belief, and that the information furnished herein is true and correct to the best of their knowledge and belief, and that the information furnished herein is true and correct to the best of their knowledge and belief.

SIGNATURE: *Georgina Beebe* GEORGINA Beebe 4/30/95 661-2376

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
SARAH B. LAKE
GOVERNOR

APPROVED
AND
FILED
JUN 10 1995
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000087514 (4)

SUMMERHILL ELECTRIC, INC.

Principal Office Address

205 E. 13TH STREET
CARRABELLE FL 32322

Mail Stop Address

205 E. 13TH STREET
CARRABELLE FL 32322

3. Date of Application
01/01/1994

3a. Date of Last Report

4. Telephone
39-3217661

Appl. Fee
New Application

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be
Added to Fees

8. This corporation has adopted a code of ethics for its directors, officers, and employees.
Yes ☒ No ☐

21. 202 13th Street East

26. PO Box 444

23. CARRABELLE, FL.

28. CARRABELLE, FL

24. 32322 25. USA

29. 32322 30. USA

9. Name and Address of Current Registered Agent

GLOVER, RICHARD A
205 E. 13TH STREET
CARRABELLE FL 32322

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number or Mailing Address)
202 13th Street East

83. City

84. State

FL

85. Zip Code

12. D
SUMMERHILL, JOHN L
205 E. 13TH STREET
CARRABELLE FL 32322

13.

202 13th Street East

14. I, the undersigned, being a duly qualified officer or director of the corporation, hereby certify that the foregoing is a true and correct copy of the annual report of the corporation for the year ended December 31, 1995, as required by law.

SIGNATURE:

SIGNATURE AND TYPE OR PRINTED NAME OF CLERKING OFFICER OR DIRECTOR

6/15/95

904-697-3103

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Tandra B. Murrain
Secretary of State
Office of the Secretary of State

APPROVED
AND
FILED

MAY 12 1995 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000087519 (3)**

1. Corporation Name

ELDORADO PASO FINO'S, INC.

Principal Office Address: **8630 FLORIDA BOYDS RANCH RD
CLERMONT FL 34711**
Mailing Address: **8630 FLORIDA BOYDS RANCH RD
CLERMONT FL 34711**

(PRINT OR WRITE IN THIS SPACE)

3. Date incorporated (or dissolved) 12/14/1993	3a. Date of last report 04/29/1994
4. FEI Number 59-3213632	Applied For Not Applicable
5. Certificate of Status (checked) ☒	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has added or subtracted tax under S. 1901A, Florida Statutes ☒ Yes ☐ No	

2. Principal Office Telephone	2a. Mailing Address
21. State Agent Name	26. State Agent Name
22. City & State	27. City & State
23. Country	28. Country
24. Country	29. Country
25. Country	30. Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**INGRAM, ROBERT C
8630 FLORIDA BOYDS RANCH RD
CLERMONT FL 34711**

81. Name
82. Street Address (if C) Box Number is Not Applicable
83.
84. City
FL 85. Zip Code

11. I, the undersigned, the person designated to prepare and file this Florida Statutes, the above named corporation's annual report for the purpose of registering its registered office or registered agent in the State of Florida. Use for foreign was authorized by the corporation's board of directors. I hereby certify the appointment of registered agent. I am familiar with and accept the qualifications of the new agent in the Florida Statutes.

SUBJECT TO:

12. DIRECTOR AND OFFICERS	13. ADDITIONAL CHANGES TO THE LIST OF DIRECTORS AND OFFICERS
NAME: P INGRAM DEBRA A	1. NAME ☐ Change ☐ Addition
STREET ADDRESS: 8630 FL BOYS RANCH RD	2. NAME ☐ Change ☐ Addition
CITY: CLERMONT FL	3. NAME ☐ Change ☐ Addition
NAME: VP INGRAM ROBERT C	4. NAME ☐ Change ☐ Addition
STREET ADDRESS: 8630 FL BOYS RANCH RD	5. NAME ☐ Change ☐ Addition
CITY: CLERMONT FL	6. NAME ☐ Change ☐ Addition
NAME:	7. NAME ☐ Change ☐ Addition
STREET ADDRESS:	8. NAME ☐ Change ☐ Addition
CITY:	9. NAME ☐ Change ☐ Addition
NAME:	10. NAME ☐ Change ☐ Addition
STREET ADDRESS:	11. NAME ☐ Change ☐ Addition
CITY:	12. NAME ☐ Change ☐ Addition
NAME:	13. NAME ☐ Change ☐ Addition
STREET ADDRESS:	14. NAME ☐ Change ☐ Addition
CITY:	15. NAME ☐ Change ☐ Addition
NAME:	16. NAME ☐ Change ☐ Addition
STREET ADDRESS:	17. NAME ☐ Change ☐ Addition
CITY:	18. NAME ☐ Change ☐ Addition
NAME:	19. NAME ☐ Change ☐ Addition
STREET ADDRESS:	20. NAME ☐ Change ☐ Addition
CITY:	21. NAME ☐ Change ☐ Addition

14. I, the undersigned, certify that the information reported with this filing is completely true and correct, and that I am duly qualified to prepare and file this Florida Statutes, and that the information reported in this report is true and correct, and that the corporation shall have the same legal effect as if made under oath. I am a resident of the State of Florida and I am the owner of the corporation. This report is required by the Florida Statutes, and that only the information that is required to be reported is to be reported.

SIGNATURE: *Robert C. Ingram*
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED AGENT OR DIRECTOR

5-15-95 (407)
339-9100

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
DAVID B. BAXTER
Secretary of State
Tallahassee, Florida 32399-0001

DOCUMENT # P93000087908 (8)

TURQUOISE INTERNATIONAL CORP.

APPROVED
AND
FILED

MAY 12 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Name and Address of Corporation % PEGIRO INC 2880 SW 58TH AVE MIAMI FL 33155		2. Mailing Address % PEGIRO INC 2880 SW 58TH AVE MIAMI FL 33155		3. Date of Registration 12/27/1993		3a. Date of Last Report 05/01/1994	
21. Principal Office 10155 Collins Ave		26. Mailing Office # 301		4. Filing Agent APPLIED FOR 65-0455888		Applied For ☐ Not Applicable	
22. City Miami		27. State FL		5. Certificate Status ☐ \$8.75 Additional Fee Required			
23. Zip 33155		28. Country USA		6. Election Campaign ☐ \$5.00 May Be Added to Fees			
24. 33155		25. USA		29. 33155		30. 33155	
9. Name and Address of Current Registered Agent PEGIRO, INC 2880 SW 58 AVE MIAMI FL 33155				10. Name and Address of New Registered Agent FL			
11. I, the undersigned, certify that the information furnished on this form is true and correct. I am a director, officer, or shareholder of the corporation, and I am authorized to execute this form on behalf of the corporation.				12. I, the undersigned, certify that the information furnished on this form is true and correct. I am a director, officer, or shareholder of the corporation, and I am authorized to execute this form on behalf of the corporation.			
13. I, the undersigned, certify that the information furnished on this form is true and correct. I am a director, officer, or shareholder of the corporation, and I am authorized to execute this form on behalf of the corporation.				14. I, the undersigned, certify that the information furnished on this form is true and correct. I am a director, officer, or shareholder of the corporation, and I am authorized to execute this form on behalf of the corporation.			

SIGNATURE: *Georgina Bebe* **Georgina Bebe** **4/30/95** **661-2376**

0105390 CP

APPROVED
AND
FILED

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA



1. The first step is to identify the problem or question that needs to be answered. This involves understanding the context and the specific requirements of the task.

TOURMALINE INTERNATIONAL CORP.

PEGIRO INC
2680 SW 58TH AVE
MIAMI FL 33155

21	10155 Collins Ave	26	
22	# 301	27	
23	Miami Beach, FL	28	
24	33154	29	
25	USA	30	

3. Date of Report	12/27/1993	3a. Date of Last Report	04/29/1994
4. Title of Project	APPLIED FOR 65-045887		Applied For First Agency Date
5. Amount of Money Received	☐	\$8.75 Additional Fee Required	
6. Free Fee (Continued) Please add First Fund Contribution	☐	\$5.00 May Be Added to Fees	
8. This corporation has liability for attorneys fees under 5-1-1000 (Financial Institution)	☐	Yes ☒ No ☐	

9. Name and Address of Current Registered Agent

PEGIRO INC.
2880 SW 58TH AVE.
MIAMI FL 33155

10. Name and Address of New Registered Agent

81	Number	
82	Street Address, City, State, Zip Code or Post Office	
83		
84	Vol.	
		85
		Page Number

11. The purpose of the present study was to determine whether the use of the proposed approach to the development of the proposed curriculum for the purpose of changing the composition of the curriculum would result in the development of a curriculum that is more relevant to the needs of the students and the needs of the community. The proposed curriculum for the purpose of changing the composition of the curriculum would result in the development of a curriculum that is more relevant to the needs of the students and the needs of the community.

2017年12月15日

[illegible][illegible]

SIGNATURE:

SIGNATURE AND TYPE OR PRINTED NAME OF MEMBER OF THE BOARD OF DIRECTORS

I, Georgina Beets *Georgina Beets* 4/30/95 (305) 661-2376
 AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

APPROVED
AND
FILED

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P93000088088 (8)**

1. Corporation Name

THREAD SOURCE, INC.

FILED
MAY 15 1995
TALLAHASSEE
FLORIDA

2. Principal Place of Business

**6320 METRO PLANTATION RD
FT. MYERS FL 33912
US**

3. Mailing Address

**PO BOX 61622
FT. MYERS FL 33306
US**

(DO NOT WRITE IN THIS SPACE)

3. Date incorporated or changed
12/20/1993

3a. Date of Last Report
05/01/1994

2. Principal Place of Business

21

2b. Mailing Address

26

4. FIC Number
65-0454815

Applied For
Not Applicable

Write Age # or

22

Write Age # or

27

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

Write State

23

Write State

28

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

24

25

26

29

30

8. This corporation has liability for intangible tax under S. 193.032
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**VACCARO, TROY T
1514 WOODWIND CT.
FT. MYERS FL 33919**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

11. I, the undersigned, being a duly qualified and sworn officer of the State of Florida, do hereby certify that the foregoing is a true and correct copy of the statement for the purpose of changing or registering the corporation as required by the Florida Statutes, Chapter 193, and the appointment as registered agent as required by the Florida Statutes, Chapter 193.

SIGNATURE

12. OFFICERS AND DIRECTORS

NAME

ADDRESS

NAME

ADDRESS

NAME

ADDRESS

NAME

ADDRESS

NAME

ADDRESS

NAME

ADDRESS

NAME

ADDRESS

NAME

ADDRESS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

NAME

ADDRESS

NAME

ADDRESS

NAME

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NAME

ADDRESS

NAME

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NAME

ADDRESS

NAME

ADDRESS

NAME

ADDRESS

14. I, the undersigned, being a duly qualified and sworn officer of the State of Florida, do hereby certify that the foregoing is a true and correct copy of the statement for the purpose of changing or registering the corporation as required by the Florida Statutes, Chapter 193, and the appointment as registered agent as required by the Florida Statutes, Chapter 193.

SIGNATURE:

Troy T. Vaccaro

TROY T. VACCARO

5/15/95

9363343

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

