FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

	1001	<u> </u>			
DOCUI	MENT # N9200	0000535 (6)	• •		
LET C	O, LET GOD, INC.				
LET GI	O, LET GOD, INO.	i .		I HARONERI AND HONE HARD AND HARON ARONI ARONI	BAND BAND BANK BING BING BUT NA
Principal Place	e of Business	Mailing Address			durit attiti antat niine titer aire tant
3846 W BRO B		3861 NW 5THS T			
PLANTATION FI US	L 33312	FT LAUDERDALE FL 33311 US	•		
		•		3. Date Incorporated or Qualified 3 11/24/1992	a. Date of Last Report 02/14/1996
2. Principal P	Place of Business *	2a. Mailing Address		4. FEI Number	Applied For
21 Snr		26 Sa		65-0360371	Not Applicable
Suite, Apt.	#, etc.	Sulte, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	e	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	
Zip	Country	Zip	Country	8. This corporation has liability for Intar	
24	25	29 30)	Florida Statutes Ye	
	9. Name and Address of Curren	it Registered Agent	81 Name	10. Name and Address of New Regist	ered Agent
A LUMBI	FIL FROME M				
CAMPBELL, EDDYE M 3861 NW 5TH ST			82 Street Ad	dress (P.O. Box Number is Not Acceptable)	
	DERDALE FL 33311		63	W	
			84 City		85 Zip Code
			84 City		FL 85 Zip Code
11.*Pursuant	to the provisions of Sections 617.050	2 and 617.1508, Florida Statutes,	the above-named co	orporation submits this statement for the purp ration's board of directors. I hereby accept th	ose of changing its registered
agent. I a	rm familiar with, and accept the obliga	ations of, Section 617.0503, Florid	la Statutes.	fation's board of directors. Thereby accept the	e appointment as registered
SIGNATURE .		ACCE IN	egistered Agent signature rei		ATE
12.	Signature typed or printed name of registered age OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICER	
TATLE	D	☐ DELETE		Director	Change Addition
NAME	CAMPBELL, EDDYE M	,	1.2 NAME	5021 West Oakin	nd Park Blud
STREET ADDRESS	3861 NW 5 ST.		1.3 STREET ADDRESS	Franderdale Lake, Fl. 3	3313
CITY-ST-ZIP	FT. LAUDERDALE FL 33311		1.4 CITY - ST - ZIP	Marilyn Whiker	
TITLE	I TD	DELETE	2.1 TITLE	Troy Wathis	Change Addition
NAME	ALLEYNE, DAVID		2.2 NAME	3764 N.W. 2 Stree	*
STREET ADORESS	462 E. MELROSE CIR. FT. LAUDERDALE FL 33312		2.3 STREET ADDRESS	tock framgity 23211	
CITY-ST-ZIP TITLE	D	DELETE	2.4 CITY-\$T-ZIP 3.1 TITLE		Change Addition
NAME	CHILDS, EVELYN	· · · · · ·	3.2 NAME		
STREET ADDRESS	2342 NW 28 ST.		3.3 STREET ADDRESS		
CITY-ST-ZIP	OAKLAND PARK FL 33311		3.4. CITY-ST-ZIP		
TITLE	D	DELETE	4.1 TITLE		Change Addition
NAME	MORGAN, JAMES		4.2 NAME		
STREET ADDRESS	542 SW 27TH TERR		4.3 STREET ADDRESS ,		
CITY-ST-ZIP TITLE	FT LADUERDALE FL	☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
NAME			5.1 IIILE 52 NAME	•	El Amerido El Vitaliani
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
	1				
NAME		i	6.2 NAME		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGN

3-25-97

(954) 79 7-4(72 Davime Phone * 0076874

FILED

May 16 1997 8:00am

Secretary of State