FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1997

DOCUMENT # POACCOMESTS (A)

1. Corporation GOD'S	REPUBLIC, INC.	0040070 (4)					
Principal Place of Business Mailing Address						A REND REAL BIRD RAKED BIR	
3308 LAKESHORE DRIVE DEERFIELD BEACH FL 33442		3308 LAKESHORE DRIVE DEERFIELD BEACH FL 33442-7981					
					 Date Incorporated or Qualifit 06/22/1994 	ed 3a. Date of La 05/01/199	
2. Principal I	Place of Business	2a. Mailing Address		4. FEI Number		Applied For	
Suite, Apt	# ala	Suite, Apt. N, etc.		65-0509958		Not Applicable 75 Additional	
22	(#, U (C	27		5. Certificate of Status Desired		e Required	
City & Sta	ile	City & State		6. Election Campaign Financin Trust Fund Contribution		.00 May Be ded to Fees	
Z(p)	Country 25	Zip 29	Country 30		This corporation has liability for Intangible tax under s. 199.032, Florida Statutes Yes No		
	g. Name and Address of Curre				10. Name and Address of Nev		
SE	LVAGE, ADELINE H.		8	1 Name			
3308 LAKESHORE DRIVE DEERFIELD BEACH FL 33442			B	2 Street Ad	Address (P.O. Box Number is Not Acceptable)		
02	CHICLD DENOTIFE 30772		8	3			
			8	4 City		FL 85	Zip Code
SIGNATURE	Signar are typed or printed name of registered as	pent and trille if approable. (NO	TE: Regislered A		orporation submits this statement for tration's board of directors. I hereby a quired when reinstating)	28/9/	
12.	OFFICERS AND DIRECTORS DP DELETE		13.		ADDITIONS/CHANGES TO O	FFICERS AND DIREC	
NAME	SELVAGE, J. PRESTON JR.		1.2 NAM	Y		O1 No.	rigo Li ridoniani
STREET ADDRESS			1.3 STRE	ET ADORESS			
CITY-ST-ZIP	DEERFIELD BEACH FL		1.4 CITY	-ST-ZIP			
TITLE	SDT	☐ DELETE	2 1 TITLE	1		L Chai	nge L Addition
NAME OTOGET ASSOCIOC	SELVAGE, ADELINE H. 3308 LAKESHORE DRIVE		2 2 NAM	E et address			
STREET ADDRESS CITY-ST-ZIP	DEERFIELD BEACH FL		2.4 CITY				
TITLE		DELETE	3.1 TITLE		· · · · · · · · · · · · · · · · · · ·	☐ Cha	nge Addition
NAME			3.2 NAM	E			
STREET ADDRESS				ET ADDRESS			
TITLE		DELETE	3.4. CITY 4.1 TITLE			☐ Cha	nge Addition
NAME			4. 2 NAM	ĵ			• —
STREET ADDRESS			4.3 STRE	ET ADDRESS			
C(TY - ST - ZIP			4.4 CITY				A 1490
Tillé		DELETE	5.1 TITLE			Chai	nge 🔲 Addition
NAME STORET ANNOUSES			5.2 NAM 5.3 STRE	E Et adoress			
STREET ADDRESS CITY-ST-712			5.4 CITY				
THU		☐ DELETE	6 1 TITLE			☐ Cha	nge Addition
NAME			62 NAM	E			
STREET ADDRESS	.		63 STAE	ET ADDRESS			

14. I do hereby certify that the information superies 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 if am an officer or director of the corporation or the ecceiver or tilestee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

6.4 CITY - ST - ZIP

SIGNATURE:

CITY-ST-ZIP

FILED

May 16 1997 8:00am

Secretary of State

Daylirne Phone #