

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725319

FILED
Aug 02, 2007
Secretary of State

Entity Name: TRIUMPH CHURCH PROCLAIMING EVERLASTING GOSPEL, INC.

Current Principal Place of Business:

2994 NW 48 ST
MIAMI, FL 33142 US

New Principal Place of Business:

Current Mailing Address:

4500 NW 33RD AVE
MIAMI, FL 33142 US

New Mailing Address:

FEI Number: 59-1679905 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BAKER, ALBERTHA MAE
4500 NW 33RD AVE
MIAMI, FL 33142 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BRADFORD, EDLER ALBERTHA
Address: 4500 NW 33 AVE
City-St-Zip: MIAMI, FL 33142

Title: S () Delete
Name: PETERSON, CEDELL
Address: 14311 NW 16 COURT
City-St-Zip: MIAMI, FL 33167

Title: S () Delete
Name: HYMES, DAVID
Address: 4261 NW 178 TERRACE
City-St-Zip: MIAMI GARDENS, FL 33056

Title: T () Delete
Name: MAINER, SANDRA
Address: 740 NW 201 ST
City-St-Zip: MIAMI GARDENS, FL 33169

Title: VCD () Delete
Name: HYMES, CLARA M,
Address: 740 NW 201 ST.
City-St-Zip: MIAMI GARDENS, FL

Title: M () Delete
Name: PETERSON, CHARLES D
Address: 14311 NW 16 COURT
City-St-Zip: MIAMI, FL 33167

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CLARA M HYMES

VCD

08/02/2007

Electronic Signature of Signing Officer or Director

Date