



**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 20, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000038850 1. Entity Name TRIUMPH, LLC	
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Principal Place of Business 2200 N. FEDERAL HIGHWAY, #203 BOCA RATON, FL 33431	Mailing Address 2200 N. FEDERAL HIGHWAY, #203 BOCA RATON, FL 33431
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DO NOT WRITE IN THIS SPACE



04102007No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-2709822	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**SULLIVAN, GREGORY M
2200 N. FEDERAL HIGHWAY, #203
BOCA RATON, FL 33431**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007**

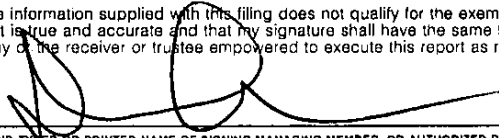
U000000719117
05/01/07-80051-005 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SULLIVAN, GREGORY M 2200 N. FEDERAL HIGHWAY, #203 BOCA RATON, FL 33431
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MUTTILLO, DOMINIC A 2200 N. FEDERAL HIGHWAY, #203 BOCA RATON, FL 33431
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**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:  **4/10/07**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #