

**2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED

Jul 15, 2004 08:00 AM
Secretary of State

DOCUMENT # N99000002190

1. Entity Name
**TRIUMPHANT CHURCH OF JESUS CHRIST, INC. OF
MIRAMAR FLORIDA**



Principal Place of Business
**2322 S.W. 60TH TERR
MIRAMAR, FL 33023**

Mailing Address
**15694 NW 41 AVE.
MIAMI, FL 33054**



07092004 No Chg-NP

CR2E037 (10/03)

4. FEI Number
65-0907340

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**CAMPBELL, MORRIS
15694 N.W. 41ST AVE.
MIAMI, FL 33054**

**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

Morris Campbell

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

7/8/04
DATE

**Filing Fee is \$61.25
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CAMPBELL, MORRIS 15694 N.W. 41ST AVE. MIAMI, FL 33054
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT CAMPBELL, DOROTHY 15694 N.W. 41ST AVE. MIAMI, FL 33054
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRAY, NADA 615 NW 210 STREET, UNIT 205 NORTH MIAMI BEACH, FL 33169
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DANIEL, CHRISSETTA P 3900 SW 52ND AVE. #103 PEMBROKE PINES, FL 33023
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT THOMAS, CLARA 4501 N.W. 12TH ST. LAUDERHILL, FL 33313
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RILEY, SHERROL 8208 NW 14TH ST. CORAL SPRINGS, FL 33071

1100000166267
07/15/04-80001-021 70.00

**DO NOT WRITE
IN THIS SPACE**

12. I 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 report or supplemental 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 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Morris Campbell

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/8/04
Date

Daytime Phone #