

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000126884

Entity Name: D.L. WELLS TRIUMPHANT ENTERPRISES, INC.**Current Principal Place of Business:**8766 KEY BISCAYNE DRIVE
APT #206
TAMPA, FL 33614**Current Mailing Address:**9200 EDWARDS WAY
SUITE #1201
ADELPHI, MD 20783 US**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**WELLS, DERRICK L SR.
8766 KEY BISCAYNE DRIVE
APT #206
TAMPA, FL 33614 US*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:** DERRICK L. WELLS, SR.

04/14/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name SINGLETARY, CIARA
Address 5008 PURITAN CIRCLE
City-State-Zip: TAMPA FL 33617

Title VP
Name WEBBER, RASHANDA
Address 9200 EDWARDS WAY
 SUITE #808
City-State-Zip: ADELPHI MD 20783

Title TREASURER
Name BURCH-WELLS, DORETHA M.
Address 1189 SALISBURY STREET
City-State-Zip: WADESBORO NC 28170

Title SECRETARY
Name WELLS, DESTINY L.
Address 664 CHERRY STREET
City-State-Zip: WADESBORO NC 28170

Title DIRECTOR
Name TAYLOR, JOSHUA
Address 6603 KINCHELOE AVE
City-State-Zip: GWYNN OAK MD 21207

Title DIRECTOR
Name WELLS, DERRICK L JR.
Address 5161 TENNIS COURT CIRCLE
City-State-Zip: TAMPA FL 33617

I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SINGLETARY, CIARA

PRESIDENT

04/14/2022

Electronic Signature of Signing Officer/Director Detail

Date