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Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P98000016266

1. Corporation Name

WARRIOR CONSTRUCTION & DEVELOPMENT CORP.

Principal Place of Business

701 BRICKELL AVE.
 SUITE 3120
 MIAMI FL 33131

Mailing Address

701 BRICKELL AVE.
 SUITE 3120
 MIAMI FL 33131

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/19/1998

4. FEI Number

65-0812 901

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐

\$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

CORPORATE CREATIONS ENTERPRISES, INC.
4521 PGA BLVD.
SUITE 211
PALM BEACH GARDENS FL 33418

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

35 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE ☐ DELETE

PD
FARKAS, MICHAEL D
701 BRICKELL AVE., SUITE 3120
MIAMI FL 33131

1.2 NAME ☐ DELETE

VP
SOLIMEO, VICTOR
701 BRICKELL AVENUE, SUITE 3120
MIAMI, FL 33131

1.3 STREET ADDRESS ☐ DELETE

ST
SOLIMEO, URSULA
701 BRICKELL AVENUE, SUITE 3120
MIAMI, FL 33131

1.4 CITY-ST-ZIP ☐ DELETE

VP
SOLIMEO, VICTOR
701 BRICKELL AVENUE, SUITE 3120
MIAMI, FL 33131

1.5 CITY-ST-ZIP ☐ DELETE

VP
SOLIMEO, VICTOR
701 BRICKELL AVENUE, SUITE 3120
MIAMI, FL 33131

1.6 CITY-ST-ZIP ☐ DELETE

VP
SOLIMEO, VICTOR
701 BRICKELL AVENUE, SUITE 3120
MIAMI, FL 33131

1.7 CITY-ST-ZIP ☐ DELETE

VP
SOLIMEO, VICTOR
701 BRICKELL AVENUE, SUITE 3120
MIAMI, FL 33131

1.8 CITY-ST-ZIP ☐ DELETE

VP
SOLIMEO, VICTOR
701 BRICKELL AVENUE, SUITE 3120
MIAMI, FL 33131

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition1.2 NAME ☐ Change ☐ Addition1.3 STREET ADDRESS ☐ Change ☐ Addition1.4 CITY-ST-ZIP ☐ Change ☐ Addition2.1 TITLE ☐ Change ☒ Addition2.2 NAME ☐ Change ☐ Addition2.3 STREET ADDRESS ☐ Change ☐ Addition2.4 CITY-ST-ZIP ☐ Change ☐ Addition3.1 TITLE ☐ Change ☐ Addition3.2 NAME ☐ Change ☐ Addition3.3 STREET ADDRESS ☐ Change ☐ Addition3.4 CITY-ST-ZIP ☐ Change ☐ Addition4.1 TITLE ☐ Change ☐ Addition4.2 NAME ☐ Change ☐ Addition4.3 STREET ADDRESS ☐ Change ☐ Addition4.4 CITY-ST-ZIP ☐ Change ☐ Addition5.1 TITLE ☐ Change ☐ Addition5.2 NAME ☐ Change ☐ Addition5.3 STREET ADDRESS ☐ Change ☐ Addition5.4 CITY-ST-ZIP ☐ Change ☐ Addition6.1 TITLE ☐ Change ☐ Addition6.2 NAME ☐ Change ☐ Addition6.3 STREET ADDRESS ☐ Change ☐ Addition6.4 CITY-ST-ZIP ☐ Change ☐ Addition

14. 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 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 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Michael D. Farkas, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-5-99 (305) 539-8100

Date

Daytime Phone

CR2E034 (1/1/98)