## 2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000003762

Entity Name: REDIL, CORP.

**FILED** Jan 28, 2021 **Secretary of State** 4958534727CC

## **Current Principal Place of Business:**

11822 SW 244TH LN HOMESTEAD, FL 33032

## **Current Mailing Address:**

11822 SW 244TH LN

HOMESTEAD. FL 33032 US

**FEI Number: NOT APPLICABLE** Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

SANTAMARIA, PAOLA 11822 SW 244TH LN HOMESTEAD, FL 33032 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:

City-State-Zip:

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title **PRESIDENT** Title

SANTAMARIA, PAOLA Name JORGE, PORRAS L DR. Name Address Address 11822 SW 244TH LN 11822 SW 244TH LN City-State-Zip: HOMESTEAD FL 33032 HOMESTEAD FL 33032 City-State-Zip:

Title S Title **SECRETARY** 

Name TABORDA, YOEL Name SANTAMARIA, LEONOR T Address 9590 NW 40TH ST RD Address 7923 SW 162 PL DORAL FL 33178 City-State-Zip:

Title Title S

Name DONADO, DAILA MAIZO, NOEMI Name Address 9590 NW 40TH ST RD 9590 NW 40TH ST RD Address DORAL FL 33178 City-State-Zip:

Title

City-State-Zip: DORAL FL 33178

FORRESTER, YAMILETH Name 9590 NW 40TH ST RD Address

MIAMI FL 33193

City-State-Zip: DORAL FL 33178

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

SIGNATURE: PAOLA L SANTAMARIA Electronic Signature of Signing Officer/Director Detail

01/28/2021 **PRESIDENT** 

Date