

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000005420

**Entity Name:** REDAVI BUSINESS DEVELOPMENT, INC.

**Current Principal Place of Business:**

175 SW 7TH STREET  
SUITE 2307  
MIAMI, FL 33130

**Current Mailing Address:**

175 SW 7TH STREET  
SUITE 2307  
MIAMI, FL 33130 US

**FEI Number:** 94-3475296

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

PONCE, FABIAN  
175 SW 7TH STREET  
SUITE 2307  
MIAMI, FL 33130 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title VP  
Name DE PONCE, VIVIANA G  
Address 175 SW 7TH STREET, SUITE 2307  
City-State-Zip: MIAMI FL 33130

Title S  
Name PONCE GIRELLI, RENE P  
Address 175 SW 7TH STREET, SUITE 2307  
City-State-Zip: MIAMI FL 33130

Title T  
Name PONCE GIRELLI, DANIEL P  
Address 175 SW 7TH STREET, SUITE 2307  
City-State-Zip: MIAMI FL 33130

Title P  
Name PONCE, FABIAN  
Address 175 SW 7TH STREET  
SUITE 2307  
City-State-Zip: MIAMI FL 33130

*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:** FABIAN PONCE

**PRESIDENT**

**04/22/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date