2020	<b>FLORIDA</b>	PROFIT	CORPOR	ATION /	ANNUAL	REPORT

DOCUMENT# P05000081284

Entity Name: ESTRELLA MCM CORP.

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

10185 COLLINS AVE #801 BAL HARBOUR, FL 33154

## **Current Mailing Address:**

10185 COLLINS AVE #801 BAL HARBOUR, FL 33154

## FEI Number: 41-2272455

## Name and Address of Current Registered Agent:

GUERRI, JUAN TOMAS 10185 COLLINS AVE APT 801 BAL HARBOUR, FL 33154 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.

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SIGNATURE	JUAN TOMAS GUERRI					
	Electronic Signature of Registered Agent			Date		
Officer/Dired	ctor Detail :					
Title	CEO, PRESIDENT	Title	ASST. SECRETARY			
Name	GUERRI, JUAN TOMAS	Name	PRINCIPI, MICAELA			
Address	10185 COLLINS AVE APT 801	Address	10185 COLLINS AVE APT 801			
City-State-Zip:	BAL HARBOUR FL 33154	City-State-Zip:	BAL HARBOUR FL 33154			
Title	DIRECTOR	Title	TREASURER			
Name	PRINCIPI, KARINA SILVANA	Name	FERRARI, CARMEN ELIDA			
Address	10185 COLLINS AVE APT 801	Address	10185 COLLINS AVE APT 801			
City-State-Zip:	BAL HARBOUR FL 33154	City-State-Zip:	BAL HARBOUR FL 33154			
Title	CFO	Title	DIRECTOR			
Name	GUERRI, CARLOS ALBERTO	Name	FERRARI, MARTA ANUNCIAD	4		
Address	10185 COLLINS AVE APT 801	Address	10185 COLLINS AVE APT 801			
City-State-Zip:	BAL HARBOUR FL 33154	City-State-Zip:	BAL HARBOUR FL 33154			

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: JUAN TOMAS GUERRI	CEO	01/16/2020
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Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

Date