

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P14000095413

**Entity Name:** MELLA CORP.**Current Principal Place of Business:**232 ANDALUSIA AVENUE, SUITE 202  
CORAL GABLES, FL 33134**Current Mailing Address:**232 ANDALUSIA AVENUE, SUITE 202  
CORAL GABLES, FL 33134**FEI Number:** 32-0453713**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NCG MANAGEMENT, LLC  
232 ANDALUSIA AVENUE, SUITE 202  
CORAL GABLES, FL 33134 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	DP
Name	MEJIA PARDO, MAURICIO M
Address	232 ANDALUSIA AVENUE, SUITE 202
City-State-Zip:	CORAL GABLES FL 33134

Title	V
Name	MEJIA LLANO, CRISTINA M
Address	232 ANDALUSIA AVENUE, SUITE 202
City-State-Zip:	CORAL GABLES FL 33134

Title	S
Name	LLANO WHITE, ANA I
Address	232 ANDALUSIA AVENUE, SUITE 202
City-State-Zip:	CORAL GABLES FL 33134

Title	ST
Name	MEJIA LLANO, ISABEL
Address	232 ANDALUSIA AVENUE, SUITE 202
City-State-Zip:	CORAL GABLES FL 33134

*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:** MEJIA PARDO, MAURICIO M**PRESIDENT****03/23/2021**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date