

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P19000071936

**FILED  
Jun 16, 2020  
Secretary of State  
0508183545CC**

**Entity Name:** VAYPA CORPORATION

**Current Principal Place of Business:**

619 NE 14TH AVE  
405  
HALLANDALE BEACH, FL 33009

**Current Mailing Address:**

619 NE 14TH AVE  
405  
HALLANDALE BEACH, FL 33009 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** Yes

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

NOCETI, HECTOR A  
619 NE 14TH AVE  
405  
HALLANDALE BEACH, FL 33009 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            PRES  
Name            NOCETI, HECTOR A  
Address        619 NE 14TH AVE, APT 405  
City-State-Zip: HALLANDALE BEACH FL 33009

Title            VP  
Name            POPULIN, MARIA J  
Address        619 NE 14TH AVE, APT 405  
City-State-Zip: HALLANDALE BEACH FL 33009

Title            SEC  
Name            NOCETI POPULIN, VALERIA C  
Address        619 NE 14TH AVE, APT 405  
City-State-Zip: HALLANDALE BEACH FL 33009

Title            SEC  
Name            NOCETI, PAULA M  
Address        619 NE 14TH AVE, APT 405  
City-State-Zip: HALLANDALE BEACH FL 33099

*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:** HECTOR NOCETI

**PRES**

**06/16/2020**

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

\_\_\_\_\_  
Date