

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008932

**FILED**  
**Mar 12, 2012**  
**Secretary of State**

**Entity Name:** R.A.P. GENERATIONS INC.

**Current Principal Place of Business:**

5585 NW 102 PL  
DORAL, FL 33178

**New Principal Place of Business:**

16378SW 102 STREET  
MIAMI, FL 33196

**Current Mailing Address:**

5585 NW 102 PL  
DORAL, FL 33178

**New Mailing Address:**

16378SW 102 STREET  
MIAMI, FL 33196

**FEI Number:** 20-8999271

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CABANA, LILIA  
5585 NW 102 PL  
DORAL, FL 33178 US

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

CABANA, LILIA  
16378SW 102 STREET  
MIAMI, FL 33196 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: \_\_\_\_\_

03/12/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: CABANA, LILIA E  
Address: 16378 SW 102 STREET  
City-St-Zip: MIAMI, FL 33196

Title: VP  
Name: PARDO, JOHN  
Address: 16378 SW 102 STREET  
City-St-Zip: MIAMI, FL 33196

Title: SEC  
Name: PARDO, ANGIE A  
Address: 16378 SW 102 STREET  
City-St-Zip: MIAMI, FL 33196

Title: TREA  
Name: CABANA, JENNY  
Address: 16378 SW 102 STREET  
City-St-Zip: MIAMI, FL 33196

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: LILIA E. CABANA P.

PRES

03/12/2012

Electronic Signature of Signing Officer or Director

Date