

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000149463

Entity Name: R-CUBED CORP.

**FILED**  
**Apr 16, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

5111-8 BAYMEADOWS RD.  
JACKSONVILLE, FL 32217 US

**New Principal Place of Business:**

**Current Mailing Address:**

5111-8 BAYMEADOWS RD.  
JACKSONVILLE, FL 32217 US

**New Mailing Address:**

FEI Number: 59-3787885

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CAPLAN LAW FIRM, P.A.  
6260-C DUPONT STATION COURT  
JACKSONVILLE, FL 32217 US

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

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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: BROWN III, ROBERT C  
Address: 5111-8 BAYMEADOWS RD.  
City-St-Zip: JACKSONVILLE, FL 32217

Title: S  
Name: BROWN, RAQUEL L  
Address: 5111-8 BAYMEADOWS RD.  
City-St-Zip: JACKSONVILLE, FL 32217

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: ROBERT C BROWN III

P

04/16/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date