2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S51966

FILED Mar 30, 2008 Secretary of State

Entity Name: JANEE'S PAPER PLACE & GIFTS, INC.

urrent Pr	imcipai Piac	e of Business:	New Princi	pal Place of Business:
	HURST RD E, FL 33766	US		
Current Mailing Address:		New Mailing Address:		
	HURST RD E, FL 33776	US		
El Number:	59-3119394	FEI Number Applied For ()	FEI Number Not Appli	cable () Certificate of Status Desired ()
lame and	Address of	Current Registered Agent:	Name and	Address of New Registered Agent:
,		US		
		submits this statement for the	purpose of changing it	s registered office or registered agent, or bo
the State	of Florida.	submits this statement for the	purpose of changing it	s registered office or registered agent, or bo
the State	e of Florida. RE:			
the State	e of Florida. RE: Electro	submits this statement for the nic Signature of Registered Anno Trust Fund Contribution ().		Date
the State	e of Florida. RE: Electro	onic Signature of Registered A	gent	
the State IGNATUR Iection Carr OFFICERS tte: ame: ddress:	e of Florida. RE: Electro npaign Financir S AND DIREC	onic Signature of Registered Anng Trust Fund Contribution (). CTORS:) Delete E	gent	Date
the State	e of Florida. RE: Electro Inpaign Financir S AND DIRECT DP (RAIMI, RENEE 212 COE ROA BELLEAIR, FL	onic Signature of Registered And Trust Fund Contribution (). CTORS:) Delete E AD . 33756) Delete E, REET, #325	gent ADDITION: Title: Name: Address:	Date S/CHANGES TO OFFICERS AND DIRECT
the State IGNATUR Idection Carr IFFICERS Itle: Iddress: Itle: Iddress: Itle: Iddress: Itle: Iddress: Itle: Iddress:	e of Florida. RE: Electro Inpaign Financir B AND DIREC DP (RAIMI, RENEE 212 COE ROA BELLEAIR, FL S (RAIMI, DENIS 625 MAIN STR ROSEVELT IS	onic Signature of Registered Amag Trust Fund Contribution (). CTORS:) Delete E. ND . 33756) Delete E. REET, #325 SLAND, NY) Delete FER	gent ADDITION: Title: Name: Address: City-St-Zip: Title: Name: Address:	Date S/CHANGES TO OFFICERS AND DIRECT () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: RENEE RAIMI DP 03/30/2008