

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S51966

FILED  
Apr 26, 2012  
Secretary of State

**Entity Name:** JANEES PAPER PLACE & GIFTS, INC.

**Current Principal Place of Business:**

1301 SEMINOLE BLVD.  
117B  
SEMINOLE, FL 33770 US

**New Principal Place of Business:**

**Current Mailing Address:**

1301 SEMINOLE BLVD.  
117B  
SEMINOLE, FL 33770 US

**New Mailing Address:**

**FEI Number:** 59-3119394      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

RAIMI, RENEE  
212 COE ROAD  
BELLEAIR, FL 33756 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:** DP  
**Name:** RAIMI, RENEE  
**Address:** 212 COE ROAD  
**City-St-Zip:** BELLEAIR, FL 33756

**Title:** S  
**Name:** RAIMI, DENISE  
**Address:** 625 MAIN STREET, #325  
**City-St-Zip:** ROSEVELT ISLAND, NY

**Title:** V  
**Name:** RAIMI, JENNIFER  
**Address:** P.O. BOX 6914  
**City-St-Zip:** BRECKENRIDGE, CO 80424

**Title:** D  
**Name:** RAIMI, MANUEL  
**Address:** 212 COE ROAD  
**City-St-Zip:** BELLEAIR, FL 33756

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: RENEE RAIMI

DP

04/26/2012

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

\_\_\_\_\_  
Date