

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000087896

Entity Name: INN-GIFTS, INC.

Current Principal Place of Business:

6969 LAMESA DR. W.
JACKSONVILLE, FL 32217

Current Mailing Address:

6969 LAMESA DR. W.
JACKSONVILLE, FL 32217

FEI Number: 59-3656500

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

OBI, JENI N.
6969 LA MESA DRIVE W
JACKSONVILLE, FL 32217 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 D
Name OBI, JENI N
Address 6969 LA MESA DRIVE W
City-State-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: JENI N OBI

DIRECTOR

02/25/2015

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date