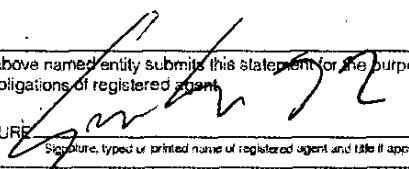
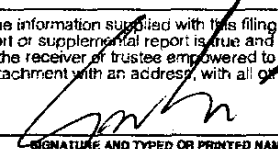


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2004 8:00 am
Secretary of State

03-16-2004 90017 050 ***150.00

DOCUMENT # P02000127287 1. Entity Name NATIVO DESIGN CO.			
Principal Place of Business 20316 NE 10 COURT ROAD NORTH MIAMI BEACH, FL 33179		Mailing Address 20316 NE 10 COURT ROAD NORTH MIAMI BEACH, FL 33179	
2. Principal Place of Business 807 NE 199 ST Suite, Apt. #, etc. # 104		3. Mailing Address P. O. BOX 693562 Suite, Apt. #, etc.	
City & State NORTH MIAMI BEACH FL		City & State MIAMI, FL	
Zip 33179		Zip 33269	
4. FEI Number 06-1662958		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent RODRIGUEZ, GERMAN A 20316 NE 10 COURT ROAD NORTH MIAMI BEACH, FL 33179		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 20824 SAN SIMEON WY # 110 City MIAMI FL Zip Code 33179	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. GERMAN A RODRIGUEZ PRESIDENT 3/8/04 DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RODRIGUEZ, GERMAN A 20316 NE 10 COURT ROAD NORTH MIAMI BEACH, FL 33179 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition 20824 SAN SIMEON WY # 110 MIAMI FL 33179
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD VASQUEZ, MARIA T 20316 NE 10 COURT ROAD NORTH MIAMI BEACH, FL 33179 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition 807 NE 199 ST # 104 NORTH MIAMI BEACH FL 33179
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		GERMAN A. RODRIGUEZ PRESIDENT 3/8/04	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	