

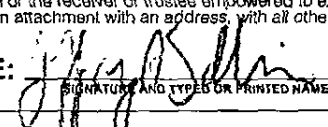


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 30, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000146534		
1. Entity Name NATIVE DESIGNS, INC.		
Principal Place of Business 661 BLANDING BLVD., STE. 103 PMB 378 ORANGE PARK, FL 32073		Mailing Address 661 BLANDING BLVD., STE. 103 PMB 378 ORANGE PARK, FL 32073
DO NOT WRITE IN THIS SPACE		
		 01262006 No Chg-P CRZE034 (11/05)
		4. FEI Number 51-0491490
		Applied For <input type="checkbox"/> Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent LAYE, L.B. JR. 795-C BLANDING BLVD. ORANGE PARK, FL 32065		DO NOT WRITE IN THIS SPACE
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>		DATE _____
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CD SULLIVAN, JEFFREY A 661 BLANDING BLVD., STE. 103 ORANGE PARK, FL 32073	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PERKINS, DANIEL T 661 BLANDING BLVD., STE. 103 ORANGE PARK, FL 32073	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:  JEFFREY A SULLIVAN, Dir		3-27-06 (904) 215-4167 Date Daytime Phone #