2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000052540

Entity Name: NATIVE OUTFITTERS, INC.

Jul 12, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
--------------------------------------	----------------------------------

420 US HWY ONE, SUITE 16 208 N. US HIGHWAY ONE NORTH PALM BEÁCH, FL 33408

US SUITE 8

TEQUESTA, FL 33469

Current Mailing Address: New Mailing Address:

420 US HWY ONE, SUITE 16 208 N. US HIGHWAY ONE

SUITE 8 NORTH PALM BEÁCH, FL 33408 US

TEQUESTA, FL 33469 US

FEI Number: 20-4724876 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GALLO, MARCO GALLO, MARCO

420 US HIGHWAY ONE 13234 ST TROPEZ CIRCLE

PALM BEACH GARDENS, FL 33410 US SUITE 16 NORTH PALM BEACH, FL FL33408 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: 07/12/2007

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition

() Delete GALLO, MARCO Name: Name: 13234 ST. TROPEZ CIRCLE Address: Address:

City-St-Zip: PALM BEACH GARDENS, FL 33410 US City-St-Zip:

Title: VD (X) Delete Title: () Change () Addition

Name: OLIVIER, RICHARD L Name: 11072 TURTLE BEACH ROAD Address: Address: NORTH PALM BEACH, FL 33408 US City-St-Zip: City-St-Zip:

Title: Title: DST (X) Delete () Change () Addition

ROMERO, ANDY Name: Name: 5380 N. OCEAN DRIVE Address: Address: City-St-Zip: SINGER ISLAND, FL 33404 US City-St-Zip:

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: MARCO GALLO PD 07/12/2007