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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000084137 (7)

BOWRAIN CORP.

Principal Place of Business	Mailing Address
241 SEVILLA AVE SUITE 805 CORAL GABLES FL 33134	241 SEVILLA AVE SUITE 805 CORAL GABLES FL 33134

FILED May 07 1998 8:00am Secretary of State



Suite, Apt. #, etc. Suite, Apt. #, etc. 27	CORAL GABLES FL 33134		CORAL GABLES FL	CORAL GABLES FL 33134			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
2. Principal Place of Business 2s. Maling Address 2s. Maling Address										
Suite, Apt #, etc. 28										
Suite, Apt #, etc. Suite, Apt #, etc. Suite, Apt #, etc. Suite, Apt #, etc. Crity & State Crity & Crity & State C	2. Principal Pl	ace of Business	2a. Mailing Address	2a. Mailing Address			1	Ap	plied For	
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Zip Country Zip Country Zip Country Personal Property 2 and Langpillo Personal Propert		Э	City & State							
Personal Property Tax due June 30. Yes No 9. Name and Address of Current Registered Agent DE LA CRUZ, LUIS F JR 241 SEVILLA AVE SUITE 805 CORAL GABLES FL 33134 82 Street Address (P.O. Box Number is Not Acceptable) 11. Pursuant to the provisions of Socions 607 1508. Firefas Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in this State of Forda Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and the provisions of Socions 607 1508. Firefas Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and the provisions of Socions 607 1508. Firefas Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and the provisions of Socions 607 1508. Firefas Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the objective of Socion 607 0505, Fiorida Statutes. SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNA	23						Trust Fund Contribution	Added t	to Fees	
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24 SEVILLA AVE SUTE 805 CORAL GABLES FL 33134 28 Street Address (P.O. Box Number is Not Acceptable) 11. Pursuant to the provisions of Sections 607 0502 and 607 1506, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the originators of, Section 607 0505, Florida Statutes SIGNATURE Signature byed or preint name of imprished agent and intri appreadule. Profit Registered Apent synthesis estatement for the purpose of changing its registered agent. I am familiar with, and accept the originators of, Section 607 0505, Florida Statutes SIGNATURE Signature byed or preint name of imprished agent and intri appreadule. Profit Registered Apent synthesis required when intrinsial appreadule. Profit Registered Apent synthesis required with a synthesis appreadule. Profit Registered Apent synthesis required when intrinsial appreadule. Profit Registered Apent synthesis required when intrinsial appreadule. Profit Registered Apent synthesis required when intrinsial appreadule. Profit States appre			nt Registered Agent		1		10, Name and Address of New Registered	Agent		
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City-St-ZiP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplied ental annual 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 occiver or truetee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on all trachment with an address.

PHONE: 56-65-255455

SIGNATURE:

SIGNATURE AND SPEED OR PRINTED HAME OF SIGN

DANIEL ALBARRAN RUIZ-CLAVIJO

07/04/98

Daytime Phone # 0190489