DOCUMENT #

P93000084137

1. Entity Name

BOWRAIN CORP.

Principal Place of Business

1601 CLOVERFIELD BLVD.

SANTA MONICA CA 90404

City & State

2ND FLOOR. SOUTH TOWER #2095

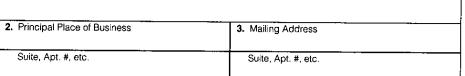
Mailing Address

City & State

1601 CLOVERFIELD BLVD.

2ND FLOOR, SOUTH TOWER #2095

SANTA MONICA CA 90404





08-27-2002 90114 019 ***558.75



DATE

DO NOT WRITE IN THIS SPACE

65-0458940

Zip	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Additional				
6. Name and Address of Current Registered Agent				7. Name and Address of New Ri	egistered Agent				
NATIONAL CORPORATE RESEARCH, LTD., INC.			Name Street Addre	Name Street Address (P.O. Box Number is Not Acceptable)					
1406 HAYS STREET SUITE #2 TALLAHASSEE FL 32301					·				
IALLANA			City		FL Zip Code				

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.

(NOTE: Registered Agent signature required when reinstating)

Tax filing requirement and elects to do so.

9. This corporation is eligible to satisfy its Intangible

Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE 15.\$550.00

After September 13, 2002 Fee will be \$750.00

10. Election Campaign Financing Trust Fund Contribution.

4. FEI Number

\$5.00 May Be Added to Fees

Applied For

Not Applicable

(See crite	eria on back)	Make Check Payab	le to Departmen	t of State	Trust Fund Contribut	ion. L.	Added	to Fees
11.	OFFICERS AND	12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PERRAMONT, FERNANDO 2550 N.W. 72 AVENUE, #210 MIAMI FL 33122	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD ROBERTO 1601 CLOVE #2095	O TAPIA ERFIELD BLVD. SANTA MON	ZND FLOOR	Change 2 Swr/ 9040	- • • •
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD GONZALEZ, JUAN CARLOS 2550 N.W. 72 AVENUE, #210 MIAMI FL 33122	⊠ Deletè	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PERRAMO 1601 CLOVER	WT, FERNAND ZFIELD BUD. Z SANTA MON	O ZND FLOOR	Change	☐ Addition Tower
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD OBREGON, CARLOS 2550 N.W. 72 AVENUE, #210 MIAMI FL 33122	⊠ Delete	NAME STREET ADDRESS CITY-ST-ZIP	アン		(D. ZND F	₹ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD DUMENES, IVAN 2550 N.W. 72 AVENUE, #210 MIAMI FL 33122	☐ 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			Γ] Change	☐ Addition
TITLE NAME STREET ADDRESS		☐ Delate	TITLE NAME STREET ADDRESS		.,	С] Change	Addition

13. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

KTURE PRAVUIRGIDSO IGNATURE AND TYPED OR