

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P93000084137

FILED
Jul 15, 2005
Secretary of State

Entity Name: BOWRAIN CORP.

Current Principal Place of Business:

6033 W. CENTURY BLVD., SUITE 210
LOS ANGELES, CA 90045

New Principal Place of Business:

Current Mailing Address:

6033 W. CENTURY BLVD., SUITE 210
LOS ANGELES, CA 90045

New Mailing Address:

1830 MAIN STREET
SUITE 200
WESTON, FL 33326 US

FEI Number: 65-0458940

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEDRO A. FREYRE, ESQ.
ONE S.E. THIRD AVE. 28TH FLOOR
MIAMI, FL, FL 33131 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FISCHER, HUMBERTO
Address: 6033 W.CENTURY BLVD. #210
City-St-Zip: LOS ANGELES, CA 90045

Title: SD () Delete
Name: TAPIA, ROBERT
Address: 6033 WEST CENTURY BLVD. #210
City-St-Zip: LOS ANGELES, CA 90045

Title: TD (X) Delete
Name: DUMENES, IVAN
Address: 6033 WEST CENTURY BLVD.#210
City-St-Zip: LOS ANGELES, CA 90045

Title: V () Delete
Name: SQUADRITTO, RAUL
Address: 6033 WEST CENTURY BLVD. #210
City-St-Zip: LOS ANGELES, CA 90045

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: FISCHER, HUMBERTO
Address: 1830 MAIN STREET, SUITE 200
City-St-Zip: WESTON, FL 33326 US

Title: SD (X) Change () Addition
Name: DUPRE, GASTON
Address: 1830 MAIN STREET, SUITE 200
City-St-Zip: WESTON, FL 33326 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VTD (X) Change () Addition
Name: SQUADRITTO, RAUL
Address: 1830 MAIN STREET, SUITE 200
City-St-Zip: WESTON, FL 33326 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: HUMBERTO FISCHER

PD

07/15/2005

Electronic Signature of Signing Officer or Director

Date