

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000005488

FILED
May 18, 2006
Secretary of State

Entity Name: RIS PAPER COMPANY, INC.

Current Principal Place of Business:

9435 WATERSTONE BLVD.
SUITE 360
CINCINNATI, OH 45249 US

New Principal Place of Business:

50 RIVERCENTRE BLVD.,
SUITE 260
COVINGTON, KY 41011 US

Current Mailing Address:

395 DE MAISONNEUVE BLVD. WEST
SUITE 1500
MONTREAL, QC H3A1L6 CA

New Mailing Address:

FEI Number: 13-5585947 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR, SUITE 4
WESTON, FL 33331 US

Name and Address of New Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR,
SUITE
WESTON, FL 33331 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:

05/18/2006

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:

Title: DP () Delete
Name: BARKER, STEVEN A
Address: 354 BUENA VISTA DRIVE
City-St-Zip: SOUTH LEBANON, OH 45065 US

Title: VT () Delete
Name: BURON, DANIEL
Address: 464 RUTLEDGE
City-St-Zip: ST-LAMBERT, QC J4R 1L5 CA

Title: DVA () Delete
Name: STROPLE, PETER W
Address: 1099 MACINTOSH LANE
City-St-Zip: FLORENCE, KY 41042 US

Title: DAS () Delete
Name: PHARAND, GILLES
Address: 292 NOTRE-DAME DE FATIMA
City-St-Zip: LAVAL, QC H7G 3Y9 CA

Title: VC () Delete
Name: MICK, GEORGE G
Address: 885 JONATHAN DRIVE
City-St-Zip: TELFORD, PA 18969 US

Title: S () Delete
Name: THEODORU, RAZVAN L
Address: 12 COURCELETTE
City-St-Zip: OUTREMONT, QC H2V 3A6 CA

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LENHOFF, JAMES F
Address: 50 RIVER CENTER BLVD., SUITE 260
City-St-Zip: COVINGTON, KY 41016 US

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: RAZVAN L. THEODORU

S

05/18/2006

Electronic Signature of Signing Officer or Director

Date