

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 08, 2005 08:00 AM
Secretary of State

DOCUMENT # L02000029675 1. Entity Name RIS MANAGEMENT, LLC	
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Principal Place of Business 8400 BRUSSELS WAY BOCA RATON, FL 33434	Mailing Address 8400 BRUSSELS WAY BOCA RATON, FL 33434
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DO NOT WRITE IN THIS SPACE



06302005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 37-1460091	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BLOCH, STUART E
MINERLEY & FEIN, P.L.
980 NORTH FEDERAL HIGHWAY, SUITE 412
BOCA RATON, FL 33432

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when renewing)
Signature, typed or printed name of registered agent and title if applicable. DATE _____

**Filing Fee is \$50.00
Due by September 7, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR SIEGEL, SANFORD J 8400 BRUSSELS WAY BOCA RATON, FL 33434
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR SIEGEL, VANESSA 8400 BRUSSELS WAY BOCA RATON, FL 33434
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07/08/05-80015-004 50.00

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11. 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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: /s/ RIS MANAGEMENT, LLC 6/30/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date (Daytime Phone #)

BY: SANFORD SIEGEL, MANAGER