FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT **CORPORATION** ANNUAL REPORT 1998



Sandra B, Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT

Principal Place of Business	Mailing Address
1470 NE 123 STREET SUITE 1103	1470 NE 123 STR

FILED May 06 1998 8:00am Secretary of State

	RIS GROUP, INC.	Mailing Address			
1470 NE 123 STREET SUITE 1103 1470 NE 123 STREET SUITE NORTH MIAMI FL 33161 NORTH MIAMI FL 33161				DO NOT WRITE IN TH	10 0DACE
				3. Date Incorporated or Qualified	IS SPACE
2. Principal I	Place of Business	2a. Mailing Address		10/10/1994 4. FEI Number	Applied For
21		26		65-0530335	Not Applicable
Suite, Apt	L. #, etc.	Suite, Apt. #, etc		5. Certificate of Status Desired	\$8.75 Additional
City & Sta	to .	City & State			Fee Required
23	ite	28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25	29	30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curr			10. Name and Address of New Register	
PE	EREZ, CARLOS		81 Name		
88	360 SW 123 COURT APT 403		92 Street Add	dress (P.O. Box Number is Not Acceptable)	
MI	IAMI FL 33186		63		
			63		
			84 City	F	85 Zip Code
office or	to the provisions of Sections 607.0 registered agent, or both, in the Sta am familiar with, and accept the obl	ate of Florida, Such change:	statutes, the above-hamed cor was authorized by the corpora	poration submits this statement for the purpose stion's board of directors. Thereby accept the a	appointment as registered
SIGNATURE				04/28/9	8
	Signature, typed or printed name of registerud a	agent and tiller applicable	15, Florida Statutés. (NOTE Registered Agent signature requirements)	04/28/9	<i>8</i>
SIGNATURE	Signature, typed or printed name of registerud a		(NOTE: Registered Agent signature requ	ired when reinstaling) O4/28/9	<i>8</i>
SIGNATURE	Signature, typed of purited name of registered a OFFICE NO. A MORA, JUAN C	agent and they applicable HIS DIRP CTORS DELETI	(NOTE: Registered Agent signature requ	ired when reinstaling) O4/28/9	8 ND DIRECTORS IN 12
SIGNATURE 12. TITLE	Signature, typed of primed have of registered a OFFICENS A MORA, JUAN C	agent and they applicable HIS DIRP CTORS DELETI	(NOTE: Registered Agent signature required) 13. 1.1 Title	ired when reinstaling) O4/28/9	8 ND DIRECTORS IN 12
SIGNATURE 12. TITLE NAME	Signature, typed of purited name of registered a OFFICE NO. A MORA, JUAN C	Agent and tiller applicable WHEN CITORS DELETI	(NOTE Registered Agent signature required) 13. E	ired when reinstaling) O4/28/9	8 ND DIRECTORS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature, typed of pureed name of registered a OFFICENS A MORA, JUAN C 1470 NE 123 STREET SUIT,	agent and they applicable HIS DIRP CTORS DELETI	(NOTE Registered Agent signature required) 13. E	ired when reinstaling) O4/28/9	8 ND DIRECTORS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed of pureed name of registered a OFFICENS A MORA, JUAN C 1470 NE 123 STREET SUIT,	Agent and tiller applicable WHEN CITORS DELETI	(NOTE Registered Agent signature required in the signature required in	ired when reinstaling) O4/28/9	E IND DIRECTORS IN 12 Change Addition
SIGNATURE 12. TITLE HAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed of primed harve of registered a OFFICENS A D MORA, JUAN C 1470 NE 123 STREET SUIT, NORTH MIAMI FL 33161	Agent and tiller applicable WHEN CITORS DELETI	### (NOTE Registered Agent signature required	ired when reinstaling) O4/28/9	E IND DIRECTORS IN 12 Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed of primed harve of registered a OFFICENS A D MORA, JUAN C 1470 NE 123 STREET SUIT, NORTH MIAMI FL 33161	Agent and the applicable WHO DIRP CTORS DELETI E 1103	INOTE Registered Agent signature required in the signature required in	ired when reinstaling) O4/28/9	MD DIRECTORS IN 12 Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed of primed harve of registered a OFFICENS A D MORA, JUAN C 1470 NE 123 STREET SUIT, NORTH MIAMI FL 33161	Agent and tiller applicable WHEN CITORS DELETI	13. E	ired when reinstaling) O4/28/9	E IND DIRECTORS IN 12 Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME	Signature, typed of printed harve of registered a OFFICENS A D MORA, JUAN C 1470 NE 123 STREET SUIT, NORTH MIAMI FL 33161	Agent and the applicable WHO DIRP CTORS DELETI E 1103	## CONTROL CON	ired when reinstaling) O4/28/9	MD DIRECTORS IN 12 Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed of printed harve of registered a OFFICENS A D MORA, JUAN C 1470 NE 123 STREET SUIT, NORTH MIAMI FL 33161	Agent and the applicable WHO DIRP CTORS DELETI E 1103	13.	ired when reinstaling) O4/28/9	MD DIRECTORS IN 12 Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed of printed harve of registered a OFFICENS A D MORA, JUAN C 1470 NE 123 STREET SUIT, NORTH MIAMI FL 33161	Applicable WHO DIRP CTORS DELETI DELETI DELETI	INOTE Registered Agent signature required. 13. E 1.1 Till.E 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP E 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP E 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	ired when reinstaling) O4/28/9	MD DIRECTORS IN 12 Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE THE	Signature, typed of printed harve of registered a OFFICENS A D MORA, JUAN C 1470 NE 123 STREET SUIT, NORTH MIAMI FL 33161	Agent and the applicable WHO DIRP CTORS DELETI E 1103	E 1.1 Taille 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP E 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP E 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP E 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP E 4.1 TITLE	ired when reinstaling) O4/28/9	MD DIRECTORS IN 12 Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	Signature, typed of printed harve of registered a OFFICENS A D MORA, JUAN C 1470 NE 123 STREET SUIT, NORTH MIAMI FL 33161	Applicable WHO DIRP CTORS DELETI DELETI DELETI	13.	ired when reinstaling) O4/28/9	MD DIRECTORS IN 12 Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed of printed harve of registered a OFFICENS A D MORA, JUAN C 1470 NE 123 STREET SUIT, NORTH MIAMI FL 33161	Applicable WHO DIRP CTORS DELETI DELETI DELETI	E 1.1 TailLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST-ZIP E 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST-ZIP E 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST-ZIP E 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY - ST-ZIP E 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS	ired when reinstaling) O4/28/9	MD DIRECTORS IN 12 Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed of printed harve of registered a OFFICENS A D MORA, JUAN C 1470 NE 123 STREET SUIT, NORTH MIAMI FL 33161	DELETI	INOTE Registered Agent signature required in the signature required in	irad when reinstaling) O4/28/9	MD DIRECTORS IN 12 Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE	Signature, typed of printed harve of registered a OFFICENS A D MORA, JUAN C 1470 NE 123 STREET SUIT, NORTH MIAMI FL 33161	Applicable WHO DIRP CTORS DELETI DELETI DELETI	INOTE Registered Agent signature required in the signature required in	irad when reinstaling) O4/28/9	MD DIRECTORS IN 12 Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed of printed harve of registered a OFFICENS A D MORA, JUAN C 1470 NE 123 STREET SUIT, NORTH MIAMI FL 33161	DELETI	INOTE Registered Agent signature required in the signature required in	irad when reinstaling) O4/28/9	MD DIRECTORS IN 12 Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed of printed harve of registered a OFFICENS A D MORA, JUAN C 1470 NE 123 STREET SUIT, NORTH MIAMI FL 33161	DELETI	INOTE Registered Agent signature required in the signature required in	irad when reinstaling) O4/28/9	MD DIRECTORS IN 12 Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed of printed harve of registered a OFFICENS A D MORA, JUAN C 1470 NE 123 STREET SUIT, NORTH MIAMI FL 33161	DELETE DELETE DELETE	INOTE Registered Agent signature required. 13. E 1.1 Title 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	irad when reinstaling) O4/28/9	MD DIRECTORS IN 12 Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed of printed harve of registered a OFFICENS A D MORA, JUAN C 1470 NE 123 STREET SUIT, NORTH MIAMI FL 33161	DELETI	INOTE Registered Agent signature required. 13. E 1.1 Title 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	irad when reinstaling) O4/28/9	MD DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signalure, typed of printed harve of registered a OFFICENS A D MORA, JUAN C 1470 NE 123 STREET SUIT, NORTH MIAMI FL 33161	DELETE DELETE DELETE	13.	irad when reinstaling) O4/28/9	MD DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signalure, typed of printed harve of registered a OFFICENS A D MORA, JUAN C 1470 NE 123 STREET SUIT, NORTH MIAMI FL 33161	DELETE DELETE DELETE	13.	irad when reinstaling) O4/28/9	MD DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Addition Addition

reference coming the morrhation supplied with this him globs not qualify for the exemption stated in Section 1.19.07(3)(), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental 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 receiver or trustee 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 an attachment with an address.