## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Mar 03, 2008 8:00 am Secretary of State

DOCUMENT # F9600001098  1. Entity Name CARL ZEISS SMT INC.						03-03-2008	90198 0	09 ***15	0.00
Principal Place of Business ONE CORPORATION WAY PEABODY, MA 01960		Mailing Address ONE CORPORATION WAY PEABODY, MA 01960				36804 	4 <b>88</b> 40 <b>88</b> 141 4181	<b>60  0</b>   1  1  1	<b>  20</b>       <b>20</b>
2. Principal Place of Business - No P.O. Box #		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02192008	Chg-P	CR2E03	34 (12/06)		
City & State		City & State		**	4. FEI Number 13-3851			_ <del>  </del>	plied For t Applicable
Zip	Country	Zip	Count			of Status Desired		\$8.75 Add	itional
	6. Name and Address of Current	Registered Agent			7. Name and	Address of New R	egistered A	gent	
0 T 0000	ODATION OVOTEM			Name					
C T.CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324				Street Addre	ess (P.O. Box Numbe	is Not Acceptable	o)		
				City	111		FL	Zip Code	<u> </u>
	named entity submits this statement to	or the purpose of changing its	registere	d affice or reg	gistered agent, or both	, in the State of Flo		amiliar with,	and accept
SIGNATURE_	Signature, typed or printed name of registered agent		F. D				DATE		
		9. Election Campa			\$5.00 May Be				
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.				Added to Fees				
10.	OFFICERS AND	DIRECTORS	11.			CHANGES TO OFF		DIRECTORS	S IN 11
title name street address	D STENKAMP, DIRK DR ONE ZEISS DR COR DOTA	□ Delete よってト いって	TITLE NAME STREE	<u> </u>	50 2 DOD 50 2 ME 24 50 20 ME 24	HON WA	4	☐ Change	Addition
CITY-S1-ZIP	THORNWOOD, NY -10591 Pe	am, pode	CITY-	ST-ZIP	reabody,	m2019	60		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST MOTTE, VIANNEY ONE ZEISS DR THORNWOOD, NY 10594	<b>☑</b> Delete		·	Director Director CORPORAL PERSON	on way		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Delete AVERDUNG, FRANK ONE ZEISE DRIVE CORPORATION WAY THORNWOOD NY 10594 PEROODY IN A			ET ADDRESS ST-ZIP	Director Director Director	્યા VL:અ.÷	zle	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		1.1	15. 24.6 t	on way	s/ies	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		i		<b>\\ 1</b>		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	•		,			☐ Change	☐ Addition
12.   hereby indicated	certify that the information supplied without this report or supplemental report	th this filing does not qualify fisher and accordant and that	or the exi my signa	emptions cont ture shall have	tained in Chapter 119 e the same legal effec	Florida Statutes. Las if made under	further cert oath; that I a	tify that the i	nformation or director

of the corporation or the receiver or trustee en changed, or on an attachment with an address

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR