

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

FILED
May 13 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 1. Corporation Name	P02160(0) Dahlberg, Inc.
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Principal Place of Business 4101 Dahlberg Drive Golden Valley, MN 55422	Mailing Address c/o Tax Dept.. One Bausch & Lomb Place Rochester, NY 14604-2701
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2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country

3. Date Incorporated or Qualified 05/23/84	3a. Date of Last Report 05/01/96
4. FEI Number 41-0952206	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent The Prentice-Hall Corporation System, Inc. 1201 Harp Street, Suite 105 Tallahassee, FL 32301

10. Name and Address of New Registered Agent
81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
85. Zip Code

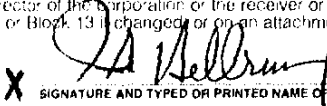
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	P D <input type="checkbox"/> DELETE
NAME	Krebc, Jerry R.
STREET ADDRESS	4101 Dahlberg Drive
CITY-ST-ZIP	Golden Valley, MN 55422
TITLE	VCFOD <input type="checkbox"/> DELETE
NAME	Naylor, Christine
STREET ADDRESS	4101 Dahlberg Drive
CITY-ST-ZIP	Golden Valley, MN 55422
TITLE	T <input type="checkbox"/> DELETE
NAME	Resnick, Alan H.
STREET ADDRESS	One Bausch & Lomb Place
CITY-ST-ZIP	Rochester, NY 14604-2701
TITLE	S <input type="checkbox"/> DELETE
NAME	Scarfone, Anthony C.
STREET ADDRESS	4101 Dahlberg Drive
CITY-ST-ZIP	Golden Valley, MN 55422
TITLE	AS <input type="checkbox"/> DELETE
NAME	Geisel, Jean F.
STREET ADDRESS	One Bausch & Lomb Place
CITY-ST-ZIP	Rochester, NY 14604-2701
TITLE	D <input type="checkbox"/> DELETE
NAME	Hellrung, Stephen A.
STREET ADDRESS	One Bausch & Lomb Place
CITY-ST-ZIP	Rochester, NY 14604-2701

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	D <input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Riedhammer, Thomas M.
1.3 STREET ADDRESS	Kurfustendamm 157/158
1.4 CITY-ST-ZIP	10439 Berlin Germany
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information submitted in this filing does not qualify for the exemption stated in Section 607.0505, Florida Statutes. I further certify that the information indicated on this annual report or supplemental 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.

SIGNATURE:  **Stephen A. Hellrung** 4/30/97 716-338-6000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)