FILED 2002 UNIFORM BUSINESS REPORT (UBR) Apr 23, 2002 8:00 am Secretary of State DOCUMENT # P17796 1. Entity Name USV OPTICAL, INC. 04-23-2002 90400 044 ***150.00 Mailing Address Principal Place of Business GLEN OAKS INDUSTRIAL PARK GLEN OAKS INDUSTRIAL PARK 944906 PO BOX 187 PO BOX 187 GLENDORA NJ 08029 GLENDORA NJ 08029 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 75-1336810 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 City Zip Code 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. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. President/CEO Delete Change ☐ Addition TITLE TITLE schwartz, William A. NAME NAME SCHWARTZ, WILLIAM A JR 1 Harmon Dr STREET ADDRESS STREET ADDRESS 10 HARMON DRIVE CITY-ST-ZIP CITY-ST-7IP **GLENDORA NJ 08029** Glendara NJO8029 Delete ☐ Change TITLE TITLE TCS Nepa, III, Carmen J. NAME NAME MCHENRY, JR., GEORGE E STREET ADDRESS STREET ADDRESS 10 HARMON DRIVE Harmon Dr Glendota NJ 08029 CITY-ST-ZIP CITY-ST-ZIP **GLENDORA NJ 08029** Delete ☐ Change ☐ Addition TITLE TITLE CEO NAME NAME SCHWARTZ, WILLIAM JR STREET ADDRESS 10 HARMON DRIVE STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP **GLENDORA NJ 08029** ☐ Addition ☐ Delete TITLE Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME

13. 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 or supplemental 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 11 or Block 12 if changed, or on an attackment with an address, with all other like empowered.

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OF FIGER OR DIRECTOR

☐ Delete

1/9/02

(856)238-1000

☐ Change

☐ Addition

Daytime Phone #