



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-261
401.222.304

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

Filing Period: January 1 - March 1 • Filing Fee: \$50.00* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK
* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. <u>13050</u>		2. Name of Corporation <u>SOUTH KINGSTOWN OPTICAL INC</u>		
3. Street Address Principal Business Office <u>298 COL. JOHN GARDINER RD</u>		City <u>NARRAGANSETT</u>	State <u>RI</u>	Zip <u>02882</u>
4. Business Phone No. <u>(401) 783-0750</u>		5. State of Incorporation <u>RI</u>		
6. Brief Description of the Character of Business Conducted in Rhode Island <u>OPTICAL</u>				

7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name <u>JOHN T. SORNBERGER</u>			Vice President Name <u>MARY N. SORNBERGER</u>		
Street Address <u>298 COL. JOHN GARDINER RD</u>			Street Address <u>298 COL. JOHN GARDINER RD</u>		
City <u>NARRAGANSETT</u>	State <u>RI</u>	Zip <u>02882</u>	City <u>NARRAGANSETT</u>	State <u>RI</u>	Zip <u>02882</u>
Secretary Name <u>MARY N. SORNBERGER</u>			Treasurer Name <u>JOHN T. SORNBERGER</u>		
Street Address <u>SAME</u>			Street Address <u>SAME</u>		
City	State	Zip	City	State	Zip

8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

9. SHARES AUTHORIZED: ("X" BOX FOR ATTACHMENT)

Number of Shares	Class/Series	Par Value
<u>40,000</u>	<u>Common</u>	<u>1.00</u>

10. SHARES ISSUED: ("X" BOX FOR ATTACHMENT)

ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value
<u>5000</u>	<u>COMMON</u>	<u>1.00</u>

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

FILED

File Date FEB 27 2008
Check No. By 1038
By: _____
FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature John T. Sornberger Date 2/16/08
JOHN T. SORNBERGER
Print or Type Name
PRESIDENT
Title