



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 2009

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. **88476** 2. Name of Corporation **CARL ZEISS SMT CORP**

3. Street Address Principal Business Office **One Corporation Way** City **Peabody** State **MA** Zip **01960**

4. Business Phone No. **914-681-7620** 5. State of Incorporation **Delaware**

6. Brief Description of the Character of Business Conducted in Rhode Island
Retail Sales & Service of Electron Microscopes

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

President Name **Nicholas Economou** Vice President Name

Street Address **One Corporation Way** Street Address

City **Peabody** State **MA** Zip **01960** City State Zip

Secretary Name **Ronald West** Treasurer Name **Ron West**

Street Address **One Corporation Way** Street Address **One Corporation Way**

City **Peabody** State **MA** Zip **01960** City **Peabody** State **MA** Zip **01960**

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

Director Name **Dr. Stefan Trager** Director Name **Dr. Stefan Stenkamp**

Street Address **One Corporation Way** Street Address **One Corporation Way**

City **Peabody** State **MA** Zip **01960** City **Peabody** State **MA** Zip **01960**

Director Name **Dr. Oliver Kienzle** Director Name **Justus Wehmer**

Street Address **One Corporation Way** Street Address **One Corporation Way**

City **Peabody** State **MA** Zip **01960** City **Peabody** State **MA** Zip **01960**

9. SHARES AUTHORIZED

This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.

10. SHARES ISSUED (*X* BOX FOR ATTACHMENT) ☐

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
1000	Common	1.00

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 11 2009**
Check No. **120574**
By **120574**
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 **Ronald West** Date **2/5/2009**
Print or Type Name **Secretary**
Title