



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2013

Filing Period: January 1 - March 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

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|---|-------------|--|--|-----------------------------|--|
| 1. Entity ID No. 000118601 | | 2. Exact name of the Corporation Horiba Instruments, Inc. | | | |
| 3. Principal office address 17671 Armstrong Ave. 9755 RESEARCH DR. | | City Irvine | State CA | Zip 92614-8 -4626 | |
| 4. Business Phone No. 949-250-4811 | | 5. State of Incorporation CA | | | |
| 6. Brief description of the character of business conducted in Rhode Island Manufacturer and Retailer for business segments: medical, auto, process and environmental, scientific and semi-conductor | | | | | |
| President Name Jai Hakhu | | | Vice-President Name Richard Marting | | |
| Street Address 17671 Armstrong Avenue 9755 RESEARCH DR. | | | Street Address 17671 Armstrong Avenue, 9755 RESEARCH DR. | | |
| City Irvine | State CA | Zip 92618-4626 92614-5727 | City Irvine | State CA | Zip 92618-4626 92614-5727 |
| Secretary Name | | | Treasurer 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 |
| Director Name | | | Director Name | | |
| Street Address | | | Street Address | | |
| City | State | Zip | City | State | Zip |
| 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. | | | NUMBER OF SHARES | CLASS/SERIES | PAR VALUE |
| | | | 2,500,000.00 | | 0 |
| | | | | | |

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.

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.

Richard Marting 02/19/2013
 Signature of Authorized Representative Date
 Richard Marting - VP of Finance / CFO
 Print or Type Name of Authorized Representative

FILED
 JUL 31 2013
 9-202893
 A.A. NO: 47A.M.