STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
*Office of the Secretary of State*

*Edward S. Inman, III, Secretary of State*
*Corporations Division*
*100 North Main Street, Providence, RI 02903-1335*
*401-222-3040*

STOP
PLEASE READ INSTRUCTIONS

# PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

***Filing Period: January 1–March 1 • Filing Fee: $50.00***

*(FORM MUST BE TYPED OR PRINTED IN BLACK)*

1. Corporate ID No.: 120900
2. Name of Corporation: DCI Acquisition Corp.
3. Street Address Principal Business Office: 266B Nooseneck Hill Road — City: Exeter — State: RI — Zip: 02822
4. Business Phone No.: 401-392-1023
5. State of Incorporation: DELAWARE
6. SIC Code: 1115
7. Brief Description of the Character of Business Conducted in Rhode Island: Design + Manufacture Optical Test Equipment

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

President Name: WIEHRS LEWIS COLLIER
Street Address: 86 INDIAN TRAIL
City: Saunderstown — State: RI — Zip: 02874

Vice President Name:
Street Address:
City — State — Zip:

Secretary Name: Kenneth A. Pietrzak
Street Address: 201 Riverdell Dr.
City: Saunderstown — State: RI — Zip: 02874

Treasurer Name: Stephen P. Atwood
Street Address: ~~#113 Tanrod Dr~~ 81 Cudworth Rd
City: Webster — State: MA — Zip: 01570

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

Director Name
Street Address
City — State — Zip

Director Name
Street Address
City — State — Zip

All officers or directors

Director Name
Street Address
City — State — Zip

Director Name
Street Address
City — State — Zip

**10. SHARES AUTHORIZED** *("X" BOX FOR ATTACHMENT)*

AUTHORIZED SHARES

| Number of Shares | Class/Series | Par Value |
|---|---|---|
| 3,000 | COMM | $0.01 PAR VALUE |

**11. SHARES ISSUED** *("X" BOX FOR ATTACHMENT)*

ISSUED SHARES

| Number of Shares | Class/Series | Par Value |
|---|---|---|
| 3,000 | | 0.01 |

This report must be **signed in ink** by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

* 120900 *

File Date: 1-9-03
Check No.: 22602
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.

Stephen P. Atwood 1/7/03
*Signature of Officer* — *Date*
Stephen P. Atwood
*Print or Type Name of Officer*
Treasurer
*Title of Officer*



*Form 630 12/02*