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PLEASE TYPE or PRINT

File Annually LLC: Sept. 1 - Nov. 1 CORP: Jan. 1 - March 1

State of Rhode Island and Providence Plantations
Office of The Secretary of State
100 North Main Street

Providence, Rhode Island 02903-1335 401-277-3040

Corporate ID: 0013700 Annual Report for the year: 1994

Name of Business Entity: <u>Uvex Winter Optical, Inc.</u>			
Business organized under the laws of the State of: RI	Business Entity is (check one): [x] Business Corporation (See RIGL Chapter 7-1.1) [] Professional Service Corporation (See RIGL Chapter 7-5.1)		
Federal Taxpayer I.D. Number: <u>05-0372765</u>			
For foreign entity, address and telephone number of principal office:	[] Limited Liability Company (See RIGL 7-16) Name, title and mailing address of contact person to whom communications may be directed: Walter Stepan Uvex Winter Optical, Inc.		
Phone: ()			
	10 Thurber Boulevard		
Address and telephone of the principal office of business entity in Rhode Island (Provide street address	Smithfield, RI 02917		
- Not P.O. Box):	Brief statement of the character of business conducted		
10 Thurber Boulevard Smithfield, RI 02917	in Rhode Island: Manufacture of safety glasses and opthalmic items		
Phone: (401) 232-1200	Date of Organization: June 8, 1977		
, id. / Edd 1200	Date of Qualification to do business in Rhode Island (if foreign entity): N/A		
THE NAMES OF	F THE OFFICERS ARE:		
[x] CHIEF EXECUTIVE OFFICER OR [X] PRESIDENT (Check One)	STREET ADDRESS CITY/STATE ZIP CODE		
Klaus Wiedner [] CHIEF OPERATING OFFICER OR [] VICE PRESIDENT (Check	Wurzburger Strasse, Furth, Germany Cone) STREET ADDRESS CITY/STATE ZIP CODE		
[] CUSTODIAN OF RECORDS OR [x] SECRETARY (Check One)	STREET ADDRESS CITY/STATE ZIP CODE		
Walter Stepan [] CHIEF FINANCIAL OFFICER OR [x] TREASURER (Check One)	Same as above STREET ADDRESS CITY/STATE ZIP CODE		
Walter Stepan THE NAMES OF	Same as above THE DIRECTORS ARE:		
	STREET ADDRESS CITY/STATE ZIP CODE		
See Attached List NAME	STREET ADDRESS CITY/STATE ZIP CODE		
NAME	STREET ADDRESS CITY/STATE ZIP CODE		
NUMBER OF SHARES AUTHORIZED (If Applicable)	NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)		
NUMBER 600	NUMBER 100		
CLASS COMMON	CLASS COMMON		
SERIES N/A	SERIES N/A		
PAR VALUE OR	PAR VALUE OR		
WITHOUT PAR NO PAR	WITHOUT PAR NO PAR		
Date <u>October</u> , 19 <u>94</u>	Ву:		
	PRINT OR TYPE NAME OF OFFICER SIGNING		
	Treasurer/Secretary		
Form 31 1/94	TITLE OF OFFICER SIGNING		
DESIGNATED REGISTERED OR RES	IDENT AGENT FOR SERVICE OF PROCESS:		
PLEASE NOTE: If the Corporation has changed its registe LLC3 must be filed.	red office and/or registered or resident agent, form 9 or form		
Philip B. Barr, Jr.	HE 111 53 1 15 100		
2700 Hospital Trust Tower	0-		
Providence, RI 02903	HE 11/22 / 12 100 BY CK #28039		
	56039		

UVEX WINTER OPTICAL, INC.

DIRECTORS

<u>Name</u>	Street Address	<u>City/State</u>	Zip Code
Rainer Winter Klaus Wiedner Gabriele Grau Michael Winter Werner Geisselmeier	10 Thurber Blvd. Same as above Same as above Same as above Same as above	Smithfield, RI	02917