



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State  
Matthew A. Brown, Secretary of State

Corporations Division  
100 North Main Street  
Providence, RI 02903-1335  
401.222.3040

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005**

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

|                                                                                                                                               |                  |                                                                     |                     |                     |
|-----------------------------------------------------------------------------------------------------------------------------------------------|------------------|---------------------------------------------------------------------|---------------------|---------------------|
| 1. Corporate ID No.<br>99710                                                                                                                  |                  | 2. Name of Corporation<br>Diamond Triumph Auto Glass, Inc.          |                     |                     |
| 3. Street Address Principal Business Office<br>220 Division Street                                                                            |                  | City<br>Kingston                                                    | State<br>Pa         | Zip<br>18704        |
| 4. Business Phone No.<br>800-999-2688                                                                                                         |                  | 5. State of Incorporation<br>DELAWARE                               |                     | 6. SIC Code<br>3533 |
| 7. Brief Description of the Character of Business Conducted in Rhode Island<br>AUTO GLASS REPLACEMENT AND REPAIR.                             |                  |                                                                     |                     |                     |
| 8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS  |                  |                                                                     |                     |                     |
| President Name<br>Michael Sunsky                                                                                                              |                  | Vice President Name<br>Richard Wooditch                             |                     |                     |
| Street Address<br>220 Division Street                                                                                                         |                  | Street Address<br>220 Division Street                               |                     |                     |
| City<br>Kingston                                                                                                                              | State<br>Pa      | Zip<br>18704                                                        | City<br>Kingston    | State<br>Pa         |
| Secretary Name<br>Michael Sunsky                                                                                                              |                  | Treasurer Name<br>Michael Sunsky                                    |                     |                     |
| Street Address<br>220 Division Street                                                                                                         |                  | Street Address<br>220 Division Street                               |                     |                     |
| City<br>Kingston                                                                                                                              | State<br>Pa      | Zip<br>18704                                                        | City<br>Kingston    | State<br>Pa         |
| 9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS |                  |                                                                     |                     |                     |
| Director Name<br>Jonathan Spitzer                                                                                                             |                  | Director Name<br>Jonathan Sokoloff                                  |                     |                     |
| Street Address<br>1111 Santa Monica Blvd                                                                                                      |                  | Street Address<br>1111 Santa Monica Blvd                            |                     |                     |
| City<br>Los Angeles                                                                                                                           | State<br>CA      | Zip<br>90025                                                        | City<br>Los Angeles | State<br>CA         |
| Director Name                                                                                                                                 |                  | Director Name                                                       |                     |                     |
| Street Address                                                                                                                                |                  | Street Address                                                      |                     |                     |
| City                                                                                                                                          | State            | Zip                                                                 | City                | State               |
| 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>                                                                       |                  | 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> |                     |                     |
| AUTHORIZED SHARES                                                                                                                             |                  | ISSUED SHARES                                                       |                     |                     |
| Number of Shares                                                                                                                              | Class/Series     | Par Value                                                           | Number of Shares    | Class/Series        |
| 1,100,000                                                                                                                                     | \$0.01 PAR VALUE |                                                                     | 1,000,000           | Common              |
|                                                                                                                                               |                  |                                                                     |                     |                     |

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



\*99710\*

|                                 |        |
|---------------------------------|--------|
| File Date                       | 2.2.05 |
| Check No.                       | 342313 |
| By:                             | 22     |
| 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 of Officer  
Richard Wooditch  
Date  
1-26-05  
Vice President - Controller  
Title of Officer

**DIAMOND TRIUMPH AUTO GLASS, INC.**  
**OFFICER/DIRECTOR LISTING**  
**01/23/05**

| <b>Officers/Directors - Diamond Triumph Auto Glass, Inc.</b> |                                                         |                                           |              |
|--------------------------------------------------------------|---------------------------------------------------------|-------------------------------------------|--------------|
| <b>Name</b>                                                  | <b>Title</b>                                            | <b>Address</b>                            | <b>Phone</b> |
| Norman Harris                                                | Chief Executive Officer                                 | 220 Division Street Kingston,<br>PA 18704 | 570-287-9915 |
| Michael Sumsy                                                | President, Chief Financial Officer<br>& General Counsel | 220 Division Street Kingston,<br>PA 18704 | 570-287-9915 |
| Kenneth Levine                                               | Chairman of the Board and<br>Director                   | 220 Division Street Kingston,<br>PA 18704 | 570-287-9915 |
| William Cogswell                                             | Vice President - Sales and Client<br>Services           | 220 Division Street<br>Kingston, PA 18704 | 570-287-9915 |
| Douglas Boyle                                                | Vice President - Finance                                | 220 Division Street<br>Kingston, PA 18704 | 570-287-9915 |
| Richard Wooditch                                             | Vice President - Corporate<br>Controller                | 220 Division Street<br>Kingston, PA 18704 | 570-287-9915 |
| Karen Christopher                                            | Vice President - Financial<br>Operations                | 220 Division Street<br>Kingston, PA 18704 | 570-287-9915 |
| Steven MacDonald                                             | Vice President - MIS                                    | 220 Division Street<br>Kingston, PA 18704 | 570-287-9915 |
| Liberato Petraglia                                           | Vice President - Distributions                          | 220 Division Street<br>Kingston, PA 18704 | 570-287-9915 |

| <b>Directors - Leonard Green &amp; Partners</b> |              |                                                                 |              |
|-------------------------------------------------|--------------|-----------------------------------------------------------------|--------------|
| <b>Name</b>                                     | <b>Title</b> | <b>Address</b>                                                  | <b>Phone</b> |
| Jonathan Seiffer                                | Director     | 11111 Santa Monica Blvd.<br>Suite 2000 Los<br>Angeles, CA 90025 | 310-954-0432 |
| John Danhaki                                    | Director     | 11111 Santa Monica Blvd.<br>Suite 2000 Los<br>Angeles, CA 90025 | 310-954-0420 |
| Jonathan Sokoloff                               | Director     | 11111 Santa Monica Blvd.<br>Suite 2000 Los<br>Angeles, CA 90025 | 310-954-0435 |



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State  
Matthew A. Brown, Secretary of State

Corporations Division  
100 North Main Street  
Providence, RI 02903-1335  
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

|                                                                                                                                    |                  |                                                            |                                                                     |              |                     |
|------------------------------------------------------------------------------------------------------------------------------------|------------------|------------------------------------------------------------|---------------------------------------------------------------------|--------------|---------------------|
| 1. Corporate ID No.<br>99710                                                                                                       |                  | 2. Name of Corporation<br>Diamond Triumph Auto Glass, Inc. |                                                                     |              |                     |
| 3. Street Address Principal Business Office<br>220 Division Street                                                                 |                  | City<br>Kingston                                           |                                                                     | State<br>Ri  | Zip<br>18704        |
| 4. Business Phone No.<br>800-999-2688                                                                                              |                  | 5. State of Incorporation<br>DELAWARE                      |                                                                     |              | 6. SIC Code<br>3533 |
| 7. Brief Description of the Character of Business Conducted in Rhode Island<br>AUTO GLASS REPLACEMENT AND REPAIR.                  |                  |                                                            |                                                                     |              |                     |
| 8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS  |                  |                                                            |                                                                     |              |                     |
| President Name<br>Michael Sumsky                                                                                                   |                  |                                                            | Vice President Name<br>Michael Sumsky                               |              |                     |
| Street Address<br>220 Division Street                                                                                              |                  |                                                            | Street Address<br>220 Division Street                               |              |                     |
| City<br>Kingston                                                                                                                   | State<br>Ri      | Zip<br>18704                                               | City<br>Kingston                                                    | State<br>Ri  | Zip<br>18704        |
| Secretary Name<br>Michael Sumsky                                                                                                   |                  |                                                            | Treasurer Name<br>Michael Sumsky                                    |              |                     |
| Street Address<br>220 Division Street                                                                                              |                  |                                                            | Street Address<br>220 Division Street                               |              |                     |
| City<br>Kingston                                                                                                                   | State<br>Ri      | Zip<br>18704                                               | City<br>Kingston                                                    | State<br>Ri  | Zip<br>18704        |
| 9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS |                  |                                                            |                                                                     |              |                     |
| Director Name<br>Gregory Annick                                                                                                    |                  |                                                            | Director Name<br>John G Dawhaki                                     |              |                     |
| Street Address<br>1111 Santa Monica Blvd STE 2000                                                                                  |                  |                                                            | Street Address<br>1111 Santa Monica Blvd STE 2000                   |              |                     |
| City<br>Los Angeles                                                                                                                | State<br>CA      | Zip<br>90025                                               | City<br>Los Angeles                                                 | State<br>CA  | Zip<br>90025        |
| Director Name<br>Jonathan D Sokoloff                                                                                               |                  |                                                            | Director Name<br>Jonathan D Sokoloff                                |              |                     |
| Street Address<br>1111 Santa Monica Blvd STE 2000                                                                                  |                  |                                                            | Street Address<br>1111 Santa Monica Blvd STE 2000                   |              |                     |
| City<br>Los Angeles                                                                                                                | State<br>CA      | Zip<br>90025                                               | City<br>Los Angeles                                                 | State<br>CA  | Zip<br>90025        |
| 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>                                                            |                  |                                                            | 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> |              |                     |
| AUTHORIZED SHARES                                                                                                                  |                  |                                                            | ISSUED SHARES                                                       |              |                     |
| Number of Shares                                                                                                                   | Class/Series     | Par Value                                                  | Number of Shares                                                    | Class/Series | Par Value           |
| 1,100,000                                                                                                                          | \$0.01 PAR VALUE |                                                            | 1,000,000                                                           | Common       | .01                 |

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



\* 9 9 7 1 0 \*

File Date 1-8-04  
Check No. 294996  
By: [Signature]

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] - President 1/4/2004  
Signature of Officer Date

Michael Sumsky  
Print or Type Name of Officer

President  
Title of Officer



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



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. 99710 2. Name of Corporation Diamond Triumph Auto Glass, Inc.

3. Street Address Principal Business Office

220 Division Street

City KINGSTON

State RI

Zip 18704

4. Business Phone No.

800-999-2688

5. State of Incorporation  
DELAWARE

6. SIC Code  
3533

7. Brief Description of the Character of Business Conducted in Rhode Island

Retail-wholesale-Installation of Auto Glass

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

President Name

Michael Sumsky

Street Address

220 Division Street

City KINGSTON State RI Zip 18704

Secretary Name

Michael Sumsky

Street Address

220 Division Street

City KINGSTON State RI Zip 18704

Vice President Name

Michael Sumsky

Street Address

220 Division Street

City KINGSTON State RI Zip 18704

Treasurer Name

Michael Sumsky

Street Address

220 Division Street

City KINGSTON State RI Zip 18704

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

Director Name

Gregory Annick

Street Address

1111 Santa Monica Blvd STE 2000

City Los Angeles State CA Zip 90025

Director Name

Jonathan D Sokoloff

Street Address

1111 Santa Monica Blvd STE 2000

City Los Angeles State CA Zip 90025

Director Name

John G. Dawhaki

Street Address

1111 Santa Monica Blvd STE 2000

City Los Angeles State CA Zip 90025

Director Name

Street Address

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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

AUTHORIZED SHARES

Number of Shares \_\_\_\_\_ Class/Series \_\_\_\_\_ Par Value \_\_\_\_\_

1,100,000 \$.01 PAR VALUE

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

ISSUED SHARES

Number of Shares \_\_\_\_\_ Class/Series \_\_\_\_\_ Par Value \_\_\_\_\_

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



\* 9 9 7 1 0 \*

File Date: 2/2/03

Check No.: 252564

By: SM

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.

Michael Sumsky  
Signature of Officer

1/27/03  
Date

Michael Sumsky  
Print or Type Name of Officer

President  
Title of Officer



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



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002**  
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 99710 2. Name of Corporation Diamond Triumph Auto Glass, Inc.

3. Street Address Principal Business Office 220 Division Street City Kingston State RI Zip 018704  
4. Business Phone No. 800-999-2688 5. State of Incorporation DELAWARE 6. SIC Code 3533

7. Brief Description of the Character of Business Conducted in Rhode Island Auto Glass - Wholesale-Retail-Installation

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

President Name Michael Sumsky Vice President Name  
Street Address Street Address  
220 Division Street  
City Kingston State RI Zip 018704  
Secretary Name Michael Sumsky Treasurer Name Michael Sumsky  
Street Address Street Address  
220 Division Street  
City Kingston State RI Zip 018704

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

Director Name Richard Rutta Director Name Jonathan Sokoloff  
Street Address Street Address  
220 Division Street  
City Kingston State RI Zip 018704  
1111 Santa Monica Blvd Ste 2000  
City Los Angeles State CA Zip 90025  
Director Name Kenneth Levine Director Name Gregory Annick  
Street Address Street Address  
220 Division Street  
City Kingston State RI Zip 018704  
1111 Santa Monica Blvd Ste 2000  
City Los Angeles State CA Zip 90025

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

AUTHORIZED SHARES

| Number of Shares | Class/Series | Par Value       |
|------------------|--------------|-----------------|
| 1,100,000        |              | \$.01 PAR VALUE |

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

ISSUED SHARES

| Number of Shares | Class/Series | Par Value |
|------------------|--------------|-----------|
| 1,000,000        | Common       | -.01      |
| 35,000           | Preferred    | -.01      |

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



\* 9 9 7 1 0 \*

File Date: 2-13-02  
Check No.: 208473  
By: [Signature]

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 of Officer [Signature] Date 1-23-02  
Print or Type Name of Officer Michael Sumsky

President / Secretary / Treasurer / CFO  
Title of Officer

DIAMOND TRIUMPH AUTO GLASS, INC.  
220 DIVISION STREET  
KINGSTON, PA. 18704

| <u>Officers</u>                                                                       | <u>Title</u>                         | <u>SSN</u>  |
|---------------------------------------------------------------------------------------|--------------------------------------|-------------|
| Michael Sumsky<br>220 Division Street<br>Kingston, PA 18704<br>(800) 999-2688         | President, Treasurer, Secretary, CFO | 149-60-8993 |
| Norman Harris<br>1513 Alum Creek Drive<br>Columbus, OH 43209<br>(614) 253-9600        | CEO                                  | 384-46-1725 |
| Richard Rutta<br>220 Division Street<br>Kingston, PA 18704<br>(800) 999-2688          | Co-Chairman                          | 196-48-0365 |
| Kenneth Levine<br>220 Division Street<br>Kingston, PA 18704<br>(800) 999-2688         | Co-Chairman                          | 166-46-7289 |
| Gregory J. Annick<br>11111 Santa Monica Blvd., Suite 2000<br>Los Angeles, CA 90025    | Director                             |             |
| John G. Danhaki<br>11111 Santa Monica Blvd., Suite 2000<br>Los Angeles, CA 90025      | Director                             |             |
| Jonathan D. Sokoloff<br>11111 Santa Monica Blvd., Suite 2000<br>Los Angeles, CA 90025 | Director                             |             |



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

Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 99710 2. Name of Corporation Diamond Triumph Auto Glass, Inc.

3. Street Address Principal Business Office 220 Division Street City KINGSTON State Pa Zip 18704  
4. Business Phone No. (570) 287-9915 5. State of Incorporation DELAWARE 6. 5553

7. Brief Description of the Character of Business Conducted in Rhode Island

Wholesale - Retail - Installation & Repair of Automobile Glass

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

|                                                                                                                                                     |                                                                                                                                                         |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|
| President Name<br><u>BORNN Harris</u><br>Street Address<br><u>1513 Alum Creek Drive</u><br>City <u>Columbus</u> State <u>OH</u> Zip <u>43209</u>    | Vice President Name<br><u>Michael A Sumsky</u><br>Street Address<br><u>220 Division Street</u><br>City <u>KINGSTON</u> State <u>Pa</u> Zip <u>18704</u> |
| Secretary Name<br><u>Michael A. Sumsky</u><br>Street Address<br><u>220 Division Street</u><br>City <u>KINGSTON</u> State <u>Pa</u> Zip <u>18704</u> | Treasurer Name<br><u>Michael A. Sumsky</u><br>Street Address<br><u>220 Division Street</u><br>City <u>KINGSTON</u> State <u>Pa</u> Zip <u>18704</u>     |

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

|                                                                                                                                                                                     |                                                                                                                                                                  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Director Name<br><u>Richards Rutta</u><br>Street Address<br><u>220 Division Street</u><br>City <u>KINGSTON</u> State <u>Pa</u> Zip <u>18704</u>                                     | Director Name<br><u>Kevinsh Levine</u><br>Street Address<br><u>220 Division Street</u><br>City <u>KINGSTON</u> State <u>Pa</u> Zip <u>18704</u>                  |
| Director Name<br><u>Gregory J Awick &amp; John G. Dabaki</u><br>Street Address<br><u>1111 Santa Monica Blvd Ste 200</u><br>City <u>Los Angeles</u> State <u>CA</u> Zip <u>90025</u> | Director Name<br><u>Jonathan Sokoloff</u><br>Street Address<br><u>1111 Santa Monica Blvd Ste 200</u><br>City <u>Los Angeles</u> State <u>CA</u> Zip <u>90025</u> |

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

AUTHORIZED SHARES

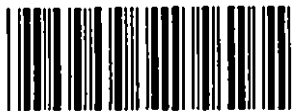
| Number of Shares | Class/Series            | Par Value |
|------------------|-------------------------|-----------|
| <u>1,100,000</u> | <u>\$ .01 PAR VALUE</u> |           |

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

ISSUED SHARES

| Number of Shares | Class/Series     | Par Value  |
|------------------|------------------|------------|
| <u>1,000,000</u> | <u>Common</u>    | <u>.01</u> |
| <u>35,000</u>    | <u>Preferred</u> | <u>.01</u> |

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



\* 9 9 7 1 0 \*

File Date: 1/22

Check No.: 93273

By: 2

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.

Michael A Sumsky Date 1-15-01  
Signature of Officer

Michael A Sumsky  
Print or Type Name of Officer

Exec VP/Sec/Treas / CFO  
Title of Officer



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

James R. Langevin, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401-222-3040



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000**

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 99710 2. Name of Corporation Diamond Triumph Auto Glass, Inc  
3. Street Address Principal Business Office 220 Division Street City Kingston State RI Zip 18704  
4. Business Phone No. (570) 287-9915 5. State of Incorporation Delaware 6. SIC Code

7. Brief Description of the Character of Business Conducted in Rhode Island

Wholesale - Retail - Repair & Replacement of Automobile Glass

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

President Name

Norman Harris

Street Address

1513 Alum Creek Drive

City

Columbus

State

OH

Zip

43209

Secretary Name

Michael A. Sumsky

Street Address

220 Division Street

City

Kingston

State

PA

Zip

18704

Vice President Name

Michael A. Sumsky

Street Address

220 Division Street

City

Kingston

State

PA

Zip

18704

Treasurer Name

Michael A. Sumsky

Street Address

220 Division Street

City

Kingston

State

PA

Zip

18704

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

Director Name

Richard Rutta

Street Address

220 Division Street

City

Kingston

State

PA

Zip

18704

Director Name

Gregory J. Anwick & John G. Dabacki

Street Address

1111 Santa Monica Blvd Ste 2000

City

Los Angeles

State

CA

Zip

90025

Director Name

Kenneth Levine

Street Address

220 Division Street

City

Kingston

State

PA

Zip

18704

Director Name

Jonathan D. Sokoloff

Street Address

1111 Santa Monica Blvd Ste 2000

City

Los Angeles

State

CA

Zip

90025

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

1,000,000 Comm \$ .01 Per value

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

1,000,000 Common .01  
35,000 Preferred .01

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

File Date: 9-5-00

Check No.: 89435

By: AMF

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.

Michael A. Sumsky Exec VP/COO 8/16/00  
Signature of Officer Date

Michael A. Sumsky  
Print or Type Name of Officer

Exec VP/COO / Secretary / Treasurer  
Title of Officer



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

James R. Langevin, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **1999**

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)



|                                                                                                                                                     |                    |                                                                     |                            |              |           |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|---------------------------------------------------------------------|----------------------------|--------------|-----------|
| 1. Corporate ID No.<br><b>99710</b>                                                                                                                 |                    | 2. Name of Corporation<br><b>Diamond Triumph Auto Glass, Inc.</b>   |                            |              |           |
| 3. Street Address Principal Business Office<br><b>220 Division Street</b>                                                                           |                    | City<br><b>Kingston</b>                                             | State<br><b>PA</b>         |              |           |
| 4. Business Phone No.<br><b>717-287-9915</b>                                                                                                        |                    | 5. State of Incorporation<br><b>DELAWARE</b>                        | 6. SIC Code<br><b>3533</b> |              |           |
| 7. Brief Description of the Character of Business Conducted in Rhode Island<br><b>Wholesale, Retail, Repair and Replacement of Automobile Glass</b> |                    |                                                                     |                            |              |           |
| 8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS         |                    |                                                                     |                            |              |           |
| President Name<br><b>Norman Harris</b>                                                                                                              |                    | Vice President Name<br><b>Michael A. Sumsky</b>                     |                            |              |           |
| Street Address<br><b>1513 Alum Creek Drive</b>                                                                                                      |                    | Street Address<br><b>220 Division Street</b>                        |                            |              |           |
| City<br><b>Columbus</b>                                                                                                                             | State<br><b>OH</b> | City<br><b>Kingston</b>                                             | State<br><b>PA</b>         |              |           |
| Zip<br><b>43209</b>                                                                                                                                 |                    | Zip<br><b>18704</b>                                                 |                            |              |           |
| Secretary Name<br><b>Michael A. Sumsky</b>                                                                                                          |                    | Treasurer Name<br><b>Michael A. Sumsky</b>                          |                            |              |           |
| Street Address<br><b>220 Division Street</b>                                                                                                        |                    | Street Address<br><b>220 Division Street</b>                        |                            |              |           |
| City<br><b>Kingston</b>                                                                                                                             | State<br><b>PA</b> | City<br><b>Kingston</b>                                             | State<br><b>PA</b>         |              |           |
| Zip<br><b>18704</b>                                                                                                                                 |                    | Zip<br><b>18704</b>                                                 |                            |              |           |
| 9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS        |                    |                                                                     |                            |              |           |
| Director Name<br><b>Richard Rutta</b>                                                                                                               |                    | Director Name<br><b>Kenneth Levine</b>                              |                            |              |           |
| Street Address<br><b>220 Division Street</b>                                                                                                        |                    | Street Address<br><b>220 Division Street</b>                        |                            |              |           |
| City<br><b>Kingston</b>                                                                                                                             | State<br><b>PA</b> | City<br><b>Kingston</b>                                             | State<br><b>PA</b>         |              |           |
| Zip<br><b>18704</b>                                                                                                                                 |                    | Zip<br><b>18704</b>                                                 |                            |              |           |
| Director Name<br><b>Gregory J. Annick and John G. Denhakl</b>                                                                                       |                    | Director Name<br><b>Jonathan D. Sokoloff</b>                        |                            |              |           |
| Street Address<br><b>11111 Santa Monica Blvd. Suite 2000</b>                                                                                        |                    | Street Address<br><b>11111 Santa Monica Blvd. Suite 2000</b>        |                            |              |           |
| City<br><b>Los Angeles</b>                                                                                                                          | State<br><b>CA</b> | City<br><b>Los Angeles</b>                                          | State<br><b>CA</b>         |              |           |
| Zip<br><b>90025</b>                                                                                                                                 |                    | Zip<br><b>90025</b>                                                 |                            |              |           |
| 10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>                                                                  |                    | 11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> |                            |              |           |
| AUTHORIZED SHARES                                                                                                                                   |                    | ISSUED SHARES                                                       |                            |              |           |
| Number of Shares                                                                                                                                    | Class/Series       | Par Value                                                           | Number of Shares           | Class/Series | Par Value |
| 1,500 COMM \$1.00 PAR VAL                                                                                                                           |                    |                                                                     | 1,000,000                  | Common       | .01       |
|                                                                                                                                                     |                    |                                                                     | 35,000                     | Preferred    | .01       |

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



\* 9 9 7 1 0 \*

File Date: **FILED**

Check No.: **MAY 28 1999**

By: **CC OCT 138**

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 of Officer: **Michael A. Sumsky** Date: **5/26/99**

Print or Type Name of Officer: **Michael A. Sumsky**  
Title of Officer: **Exec. VP / CFO / Secretary / Treasurer**