



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 IN BLACK)

1. Corporate ID No. 87368		2. Name of Corporation Scientific Instruments Development, Inc.			
3. Street Address Principal Business Office 584 PARK EAST DRIVE			City WOONSOCKET	State RI	Zip 02895
4. Business Phone No. 401-765-7500		5. State of Incorporation RHODE ISLAND			6. SIC Code 1883
7. Brief Description of the Character of Business Conducted in Rhode Island TO MANUFACTURE, BUY, SELL AND OTHERWISE DEAL IN MEASURINGEQUIPMENT.					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name MARTINO NARDO			Vice President Name NONE		
Street Address 584 PARK EAST DRIVE			Street Address		
City WOONSOCKET	State RI	Zip 02895	City	State	Zip
Secretary Name MARTINO NARDO			Treasurer Name MARTINO NARDO		
Street Address 584 PARK EAST DRIVE			Street Address 584 PARK EAST DRIVE		
City WOONSOCKET	State RI	Zip 02895	City WOONSOCKET	State RI	Zip 02895
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name MARTINO NARDO			Director Name		
Street Address 584 PARK EAST DRIVE			Street Address		
City WOONSOCKET	State RI	Zip 02895	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> AUTHORIZED SHARES					
Number of Shares			Class/Series		
8,000 COMM \$1.00 PAR VALUE			COMMON		
11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ISSUED SHARES					
Number of Shares		Class/Series		Par Value	
8.5272		COMMON		\$1.00	

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



8 7 3 6 8

File Date 3/3/05
Check No. 040663
By: W.
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.

Martino Nardo 02/25/05
Signature of Officer Date
MARTINO NARDO
Print or Type Name of Officer
PRESIDENT
Title of Officer



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 IN BLACK)

1. Corporate ID No. 87368		2. Name of Corporation Scientific Instruments Development, Inc.			
3. Street Address Principal Business Office 584 PARK EAST DRIVE			City WOONSOCKET	State RI	Zip 02895
4. Business Phone No. 401-765-7500		5. State of Incorporation RHODE ISLAND			6. SIC Code 1883
7. Brief Description of the Character of Business Conducted in Rhode Island TO MANUFACTURE, BUY, SELL AND OTHERWISE DEAL IN MEASURINGEQUIPMENT.					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS.					
President Name MARTINO NARDO			Vice President Name NONE		
Street Address 584 PARK EAST DRIVE			Street Address		
City WOONSOCKET	State RI	Zip 02895	City	State	Zip
Secretary Name MARTINO NARDO			Treasurer Name MARTINO NARDO		
Street Address 584 PARK EAST DRIVE			Street Address 584 PARK EAST DRIVE		
City WOONSOCKET	State RI	Zip 02895	City WOONSOCKET	State RI	Zip 02895
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS.					
Director Name MARTINO NARDO			Director Name		
Street Address 584 PARK EAST DRIVE			Street Address		
City WOONSOCKET	State RI	Zip 02895	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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
8,000	COMM \$1.00 PAR VALUE		8.5272	COMMON	\$1.00

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



8 7 3 6 8

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.

Martino Nardo 03/05/04
Signature of Officer Date
MARTINO NARDO
Print or Type Name of Officer
PRESIDENT
Title of Officer

87368 DBC 01/28/04 03:29:14 PM
File Date 3-9-04
Check No 3830L
By 2
FOR SECRETARY OF STATE USE ONLY



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. **87368** 2. Name of Corporation **Scientific Instruments Development, Inc.**
3. Street Address Principal Business Office **584 Park East Drive** City **Woonsocket** State **RI** Zip **02895**
4. Business Phone No. **401-765-7600** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **1883**

7. Brief Description of the Character of Business Conducted in Rhode Island
Manufacturing and/or sales measuring equipment

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

President Name Martino Nardo	Vice President Name
Street Address 584 Park East Drive	Street Address
City State Zip Woonsocket RI 02895	City State Zip
Secretary Name Martino Nardo	Treasurer Name Martino Nardo
Street Address as above	Street Address as above
City State Zip	City State Zip

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

Director Name Martino Nardo	Director Name
Street Address as above	Street Address
City State Zip	City State Zip
Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip

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

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
8,000 COMM \$1.00 PAR VALUE

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

ISSUED SHARES
Number of Shares Class/Series Par Value
8.5272 Common \$1.00

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



* 8 7 3 6 8 *

File Date: 3-7-03
Check No.: 35514
By: AMF

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 Martino Nardo Date 03/04/03

Martino Nardo
Print or Type Name of Officer
President
Title of Officer



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. **87368** 2. Name of Corporation **Scientific Instruments Development, Inc.**
3. Street Address Principal Business Office **584 Park East Drive** City **Woonsocket** State **RI** Zip **02895**
4. Business Phone No. **401-765-7600** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **1883**

7. Brief Description of the Character of Business Conducted in Rhode Island
Manufacturing and/or sales of measuring equipment

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

President Name Martino Nardo			Vice President Name		
Street Address 584 Park East Drive			Street Address		
City Woonsocket	State RI	Zip 02895	City	State	Zip
Secretary Name Martino Nardo			Treasurer Name Martino Nardo		
Street Address as above			Street Address as above		
City	State	Zip	City	State	Zip

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

Director Name Martin Nardo			Director Name		
Street Address as above			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

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

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
8,000 COMM \$1.00 PAR VALUE

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

ISSUED SHARES
Number of Shares Class/Series Par Value
8.5272 Common \$1.00

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



* 8 7 3 6 8 *

File Date: 4-11-02
Check No.: 29357
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.

Martino Nardo 4/4/02
Signature of Officer Date

Martino Nardo
Print or Type Name of Officer

President

Title of Officer



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. **87368** 2. Name of Corporation **Scientific Instruments Development, Inc.**

3. Street Address Principal Business Office **584 Park East Drive** City **Woonsocket** State **RI** Zip **02895**

4. Business Phone No. **401-765-7600** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **1883**

7. Brief Description of the Character of Business Conducted in Rhode Island
Manufacturing and/or sales of measuring equipment

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

President Name			Vice President Name		
Sergio Berti					
Street Address			Street Address		
Viale Delle Industrie, 13					
City	State	Zip	City	State	Zip
Ronchi Di	Italy	350 10			
Secretary Name			Treasurer Name		
Sergio Berti			Sergio Berti		
Street Address			Street Address		
as above			as above		
City	State	Zip	City	State	Zip

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

Director Name			Director Name		
Sergio Berti					
Street Address			Street Address		
Viale Delle Industrie, 13					
City	State	Zip	City	State	Zip
Ronchi Di	Italy	350 10			
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

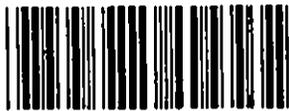
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES	Class/Series	Par Value
8,000 SHS COMM	\$1.00 PAR	

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

ISSUED SHARES	Class/Series	Par Value
8.4617	Common	\$1.00

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



* 8 7 3 6 8 *

File Date **FILED**

Check No. **APR 23 2001**

By **CC 7880**
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 **4/16/01**

Sergio Berti
Print or Type Name of Officer

President
Title of Officer



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. **87368** 2. Name of Corporation **Scientific Instruments Development, Inc.**
3. Street Address Principal Business Office **584 Park East Drive** City **Woonsocket** State **RI** Zip **02895**
4. Business Phone No. **401-765-7600** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **1883**

7. Brief Description of the Character of Business Conducted in Rhode Island
Manufacturing and/or sales of measuring equipment

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

President Name Sergio Berti	Vice President Name
Street Address Viale Delle Industrie, 13	Street Address
City Ronchi Di State Italy Zip 350 10	City State Zip
Secretary Name Sergio Berti	Treasurer Name Sergio Berti
Street Address as above	Street Address as above
City State Zip	City State Zip

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

Director Name Sergio Berti	Director Name
Street Address Viale Delle Industrie, 13	Street Address
City Ronchi Di State Italy Zip 350 10	City State Zip
Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip

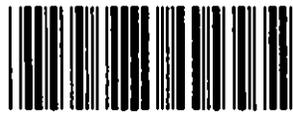
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
8,000 SHS COMM \$1.00 PAR

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

ISSUED SHARES
Number of Shares Class/Series Par Value
8.066 Common \$1.00

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



* 8 7 3 6 8 *

File Date:

Check No:

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.

Sergio Berti Signature of Officer Date

Sergio Berti Print or Type Name of Officer

President Title of Officer



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. **87368** 2. Name of Corporation **Scientific Instruments Development, Inc.**
3. Street Address Principal Business Office City State Zip
584 Park East Drive Woonsocket RI 02895
4. Business Phone No. 401-765-7600 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **1883**

7. Brief Description of the Character of Business Conducted in Rhode Island
manufacturing and/or sales of measuring equipment

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

President Name Sergio Berti	Vice President Name
Street Address Viale Delle Industrie, 13	Street Address
City State Zip Ronchi Di Villafranca Italy 350 10	City State Zip
Secretary Name Sergio Berti	Treasurer Name Sergio Berti
Street Address same as above	Street Address same as above
City State Zip	City State Zip

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

Director Name Sergio Berti	Director Name
Street Address Viale Delle Industrie, 13	Street Address
City State Zip Ronchi Di Villafranca Italy 350 10	City State Zip
Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip

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

AUTHORIZED SHARES	Class/Series	Par Value
8,000 SHS COMM \$1.00 PAR		

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

ISSUED SHARES	Class/Series	Par Value
8.025	Common	\$1.00

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



* 8 7 3 6 8 *

File Date: Mar 4, 1999
Check No.: 20199
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: [Signature] Date: 2/25/99
Sergio Berti
Print or Type Name of Officer
President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **87368** 2. Name of Corporation **Scientific Instruments Development, Inc.**
3. Street Address Principal Business Office **584 Park East Drive** City **Woonsocket** State **RI** Zip **02895**
4. Business Phone No. **401-765-7500** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **1883**

7. Brief Description of the Character of Business Conducted in Rhode Island
manufacturing and/or sales of measuring equipment

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)

President Name Sergio Berti Street Address Viale Delle Industrie, 13 City Ronchi Di State Italy Zip 350 10 Secretary Name Sergio Berti Street Address same as above City _____ State _____ Zip _____	Vice President Name Street Address City _____ State _____ Zip _____ Treasurer Name Sergio Berti Street Address same as above City _____ State _____ Zip _____
--	--

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)

Director Name Sergio Berti Street Address Viale Delle Industrie, 13 City Ronchi Di State Italy Zip 350 10	Director Name Street Address City _____ State _____ Zip _____
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
8,000 SHS COMM \$1.00 PAR			

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

ISSUED SHARES	Number of Shares	Class/Series	Par Value
8.025	8.025	Common	\$1.00

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



File Date: 7/27/98
Check No.: 5189
By: JMD
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: 06/01/98
Print or Type Name of Officer: Sergio Berti
Title of Officer: President



PROFIT CORPORATION ANNUAL REPORT 1997

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **87368** 2. Name of Corporation **Scientific Instruments Development, Inc.**

3. Street Address Principal Business Office City State Zip
584 Park East Drive Woonsocket RI 02895

4. Business Phone No. 401-765-7500 5. State of Incorporation **RHODE ISLAND** 6 SIC Code **1883**

7. Brief Description of the Character of Business Conducted in Rhode Island
manufacturing and/or sales of measuring equipment

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)

President Name				Vice President Name			
Sergio Berti							
Street Address				Street Address			
Viale Delle Industrie, 13							
City	State	Zip		City	State	Zip	
Ronchi Di	Italy	350 10					
Villafranca							
Secretary Name				Treasurer Name			
Sergio Berti				Sergio Berti			
Street Address				Street Address			
same as above				same as above			
City	State	Zip		City	State	Zip	

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)

Director Name				Director Name			
Sergio Berti							
Street Address				Street Address			
Viale Delle Industrie, 13							
City	State	Zip		City	State	Zip	
Ronchi Di	Italy	350 10					
Villafranca							
Director Name				Director Name			
Street Address				Street Address			
City	State	Zip		City	State	Zip	

10. SHARES AUTHORIZED AND ISSUED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
8,000 SHS COMM	\$1.00 PAR		8	Common	\$1.00

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



* 8 7 3 6 8 *

File Date: 4/11/97

Check No.: 4243

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] 31/3/1997

Signature of Officer Date

Sergio Berti

Print or Type Name of Officer

President

Title of Officer