

1.) CORPORATION NAME:

SCHEIDT & BACHMANN USA, INC.

DUE DATE: **6/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX RD STE 301
GLEN ALLEN, VA**

SCC ID NO: **F1473828**

5.) STOCK INFORMATION

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| CLASS | AUTHORIZED |
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 31 NORTH AVE

CITY/ST/ZIP: BURLINGTON, MA 01803

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

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|-----------------|---|---|--|
| NAME: | JOHN MACDONALD | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: | PRESIDENT | | |
| ADDRESS: | 13 STALLBROOK ROAD | | |
| CITY/ST/ZIP/CO: | MEDWAY, MA 02053 | | |
| NAME: | DAVID MACALAUY | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | VICE PRESIDENT | | |
| ADDRESS: | 107 RIDGE LANE APT 303 | | |
| CITY/ST/ZIP/CO: | WALTHAM, MA 02452 | | |
| NAME: | SIMON TALBOT | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: | VICE PRESIDENT | | |
| ADDRESS: | 188 CRANBROOK ROAD | | |
| CITY/ST/ZIP/CO: | KITCHNER, ON, N2P-2, CANADA , , FN | | |
| NAME: | JOHN MACDONALD | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: | TREASURER | | |
| ADDRESS: | 13 STALLBROOK ROAD | | |
| CITY/ST/ZIP/CO: | MEDWAY, MA 02053 | | |
| NAME: | MARGARET PRUE | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: | SECRETARY | | |
| ADDRESS: | 669 SOUTH MAIN ST | | |
| CITY/ST/ZIP/CO: | BRADFORD, MA 01835 | | |
| NAME: | DR NORBERT MILLER | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | CHAIRMAN | | |
| ADDRESS: | 32 BREITE STRASSE | | |
| CITY/ST/ZIP/CO: | MUNCHENGALDBACH, D-412, GERMANY , , FN | | |

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|--|---|----------------------------------|--|
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | MATTHIAS AUGUSTYNIAK DIRECTOR 132 BREITE STRASSE MONCHENGLADBACH,D-412,GERMANY , , FN | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | MARTIN KAMMLER DIRECTOR 132 BREITE STRASSE MONCHENGLADBACH,D-412,GERMANY , , FN | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | GERD STRAETENER DIRECTOR 132 BREITE STRASSE MONCHENGLADBACH,D-412,GERMANY , , FN | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT. | | | |
| /s/ MARGARET PRUE SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | MARGARET PRUE, SECRETARY PRINTED NAME AND CORPORATE TITLE | 5/17/2013 DATE | |
| It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing. | | | |