

1.) CORPORATION NAME:

ULVAC Technologies, Inc.

DUE DATE: **4/30/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY
Bank of America Center, 16th Floor
1111 East Main Street**

SCC ID NO: **F1856014**

RICHMOND, VA 23219

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	2,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 401 GRIFFIN BROOK DR

CITY/ST/ZIP: METHUEN, MA 01844

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.

NAME:	WAYNE ANDERSON	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRES / CEO		
ADDRESS:	401 GRIFFIN BROOK DR		
CITY/ST/ZIP/CO:	METHUEN, MA 01844		

NAME:	DAVE SACKETT	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	401 GRIFFIN BROOK DR		
CITY/ST/ZIP/CO:	METHUEN, MA 01844		

NAME:	PAUL DIAMOND	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	401 GRIFFIN BROOK DR		
CITY/ST/ZIP/CO:	METHUEN, MA 01844		

NAME:	CHRIS GOEBEL	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	401 GRIFFIN BROOK DR		
CITY/ST/ZIP/CO:	METHUEN, MA 01844		

NAME:	RYOSHIN IMAI	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	401 GRIFFIN BROOK DR		
CITY/ST/ZIP/CO:	METHUEN, MA 01844		

NAME:	MIKE SCHROTH	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	401 GRIFFIN BROOK DR		
CITY/ST/ZIP/CO:	METHUEN, MA 01844		

NAME: DIANE HANLEY TITLE: DIRECTOR ADDRESS: 401 GRIFFIN BROOK DR CITY/ST/ZIP/CO: METHUEN, MA 01844	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: SUSAN ZILARO TITLE: DIRECTOR ADDRESS: 401 GRIFFIN BROOK DR CITY/ST/ZIP/CO: METHUEN, MA 01844	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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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/ DAVE SACKETT	DAVE SACKETT,	3/30/2012
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	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.