

1.) CORPORATION NAME: <b>Spectrum Surgical Instruments Corp.</b> 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>CT CORPORATION SYSTEM          4701 COX RD STE 301          GLEN ALLEN, VA 23060-6802</b> 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>HENRICO COUNTY</b> 4.) STATE OR COUNTRY OF INCORPORATION: <b>OH</b>	DUE DATE: <b>5/31/2012</b> SCC ID NO: <b>F1859521</b> 5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>500</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	500
CLASS	AUTHORIZED				
COMMON	500				

6.) PRINCIPAL OFFICE ADDRESS:	
ADDRESS: 4575 HUDSON DR	
CITY/ST/ZIP: STOW, OH 44224	

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: MICHELLE A SCHULZ TITLE: Co-CEO/SEC ADDRESS: 4575 HUDSON DR CITY/ST/ZIP/CO: STOW, OH 44224	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: RICK COSTELLO TITLE: PRE ADDRESS: 4575 HUDSON DR CITY/ST/ZIP/CO: STOW, OH 44224	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: RICHARD J SCHULTZ TITLE: DIRECTOR ADDRESS: 4575 HUDSON DR CITY/ST/ZIP/CO: STOW, OH 44224	<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/ RICK COSTELLO	RICK COSTELLO, PRE	4/27/2012
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.