	Due no later than Sep 30, 2002 Annual Report Form 1. Mailing Address - Correct in this box, if applicable PERKINELMER INSTRUMENTS LLC 710 BRIDGEPORT AVE M/S 172		Registered Agent and Office NO PO BOX CORPORATION SERVICE COMPAN 1401 SHORELINE DR STE 2 BOISE, ID 83702	
No. W 12846 Return to:				
SECRETARY OF STATE				
700 WEST JEFFERSON				
PO BOX 83720 BOISE, ID 83720-0080				
NO FILING FEE IF RECEIVED BY DUE DATE	SHELTON, CT 06484 4794	3.	3. New Registered Agent Signature	
	anies: Enter Names and Addresses of N	Members.		
Office held Name	Street or P.O. Address	<u>City</u>	<u>State</u>	<u>Zip</u>
5. Organized Under the Laws of:	6. Signatura	P. Some	Nate 7	b5/02
Organized Under the Laws of:DELAWARE	Signature Steps	V CATAVAGE	Date _ 7	
-	Signature	V CATAVAGE		bsloz istant Secret