

UNIFORM COMMERCIAL CODE - FINANCING STATEMENT - FORM UCC-1
IMPORTANT - Read instructions on back before filling out form.

This FINANCING STATEMENT is presented for filing pursuant to the Nevada Uniform Commercial Code.

1. DEBTOR (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input type="checkbox"/> INDIVIDUAL (LAST NAME FIRST)		OPTICOMP CORPORATION, a Nevada Corporation		1A. SOCIAL SECURITY OR FEDERAL TAX NO. 88-0221939	
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1B. MAILING ADDRESS P. O. Box 10779		1C. CITY, STATE Zephyr Cove, Nevada		1D. ZIP CODE 89448	
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1E. RESIDENCE ADDRESS		1F. CITY, STATE		1G. ZIP CODE	
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2. ADDITIONAL DEBTOR (IF ANY) (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input type="checkbox"/> INDIVIDUAL (LAST NAME FIRST)		2A. SOCIAL SECURITY OR FEDERAL TAX NO.			
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2B. MAILING ADDRESS		2C. CITY, STATE		2D. ZIP CODE	
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2E. RESIDENCE ADDRESS		2F. CITY, STATE		2G. ZIP CODE	
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3. ADDITIONAL DEBTOR(S) ON ATTACHED SHEET

4. SECURED PARTY NAME Valley Bank of Nevada MAILING ADDRESS P. O. Box 611 CITY Carson City STATE Nevada ZIP CODE 89702				4A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO. 94-72/1224	
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5. ASSIGNEE OF SECURED PARTY (IF ANY) NAME MAILING ADDRESS CITY STATE ZIP CODE				5A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO.	
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6. This FINANCING STATEMENT covers the following types or items of property (if crops or timber, include description of real property on which growing or to be growing and name of record owner of such real estate; if fixtures, include description of real property to which affixed or to be affixed and name of record owner of such real estate; if oil, gas or minerals, include description of real property from which to be extracted).
 One (1) Macintosh II fx 4MB CPU computer with attached hardware including, but not limited to, Macintosh II SI 40/2, and MSF-300ZS Color image scanner, and 16" color display with color card.
 One (1) Canon 2020 Copier.
 One (1) HP DraftPro DXL drafting pen plotter, HP Model #7575A

6A. _____
SIGNATURE OF RECORD OWNER
N/A

6C. \$ _____
MAXIMUM AMOUNT OF INDEBTEDNESS TO BE SECURED AT ANY ONE TIME (OPTIONAL)

6B. _____
(TYPE) RECORD OWNER OF REAL PROPERTY

7. Check <input checked="" type="checkbox"/> if Applicable	A <input checked="" type="checkbox"/> Proceeds of collateral are also covered	B <input type="checkbox"/> Products of collateral are also covered	C <input type="checkbox"/> Proceeds of above described original collateral in which a security interest was perfected (Debtors Signature Not Required)	D <input type="checkbox"/> Collateral was brought into this State subject to security interest in another jurisdiction (Debtors Signature Not Required)
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8. Check if Applicable DEBTOR IS A "TRANSMITTING UTILITY" IN ACCORDANCE WITH NRS 704.205 AND NRS 104.9403

9. OPTICOMP CORPORATION, a Nevada Corporation
 (Date) November 27 1990
 By: *Peter S. Skiffington* President
 Peter S. Skiffington (TITLE)
 By: *John D. Cooper* Asst. Vice President
 Valley Bank of Nevada (TYPE NAME(S))
 John Cooper (TYPE NAME(S))

11. This Space for Use of Filing Officer
 (Date, Time, File Number and Filing Officer)
 07186
 REQUESTED BY Valley Bank of Nevada
 IN OFFICIAL RECORDS OF DOUGLAS COUNTY, NEVADA

10. Return Copy to
 Valley Bank of Nevada
 NAME P. O. Box 611
 ADDRESS Carson City, NV 89702
 CITY, STATE Attention: Marcia Thorpe
 AND ZIP 312MT116/11260/1N

90 NOV 30 P2:35
 SUE ANNE DE LOUREAU
 RECORDER 240101
 \$10.00 PAID KID DEPUTY

THIS SPACE FOR USE OF FILING OFFICER