

ASAL
ORIGINAL

PIHAK BERKUASA
PERANTI PERUBATAN



MEDICAL DEVICE
AUTHORITY

PIHAK BERKUASA PERANTI PERUBATAN
MEDICAL DEVICE AUTHORITY
AKTA PERANTI PERUBATAN 2012 (AKTA 737)
MEDICAL DEVICE ACT 2012 (ACT 737)
SIJIL PENDAFTARAN PERANTI PERUBATAN
MEDICAL DEVICE REGISTRATION CERTIFICATE
Seksyen 5(1) Akta 737
Section 5(1) of Act 737

No. Pendaftaran: **GB88602173917**
Registration No.:

Tarikh Sah Laku Pendaftaran:
Registration Validity Date:

17/03/2017 - 16/03/2022

Sijil ini adalah dengan ini dikeluarkan kepada:
This Certificate is hereby issued to:

SUPERVISION OPTIMAX SDN BHD

yang beralamat di:
of:

**2ND FLOOR, LOT 38 PUTRA INDUSTRIAL PARK
BUKIT RAHMAN PUTRA
40160 SUNGAI BULOH
40160 SELANGOR**

bagi mengesahkan peranti perubatan seperti yang dinyatakan dalam Lampiran 1 adalah berdaftar di bawah Seksyen 5(1) Akta 737.

to confirm that the medical device as detailed out in Attachment 1 is registered under Section 5(1) of Act 737.

Pendaftaran ini diberikan tertakluk kepada peruntukan-peruntukan di bawah Akta 737 dan peraturan-peraturan yang dibuat dibawahnya serta syarat-syarat seperti di Lampiran 2.

This registration is granted subject to the provisions under Act 737 and its subsidiary legislations and the conditions as in Attachment 2.



A handwritten signature in black ink, appearing to be 'ZAMANE BIN ABDUL RAHMAN'.

ZAMANE BIN ABDUL RAHMAN
Ketua Eksekutif

Chief Executive

Pihak Berkuasa Peranti Perubatan
Medical Device Authority

LAMPIRAN 1
Attachment 1



No. Pendaftaran: GB88602173917
Registration No.:

Butir-butir peranti perubatan yang didaftarkan
Particulars of the registered medical device

Nama Peranti Perubatan CONTACT LENSES
Medical Device Name

Kelas CLASS B Brand AVEO
Class Brand

Kelompok FAMILY
Group

Nama dan alamat pembuat: SUPERVISION OPTIMAX SDN BHD
Name and address of manufacturer 2ND FLOOR, LOT 38, JALAN BRP 9/2,
PUTRA INDUSTRIAL PARK
BUKIT RAHMAN PUTRA

APPENDIX

No.	NAME AS PER DEVICE LABEL	IDENTIFIER	BRIEF DESCRIPTION OF ITEM
1.	Aveo	1 DAY	42% Filcon II2 & 58% Water Content Soft Contact Lens. Single use daily disposable soft contact lens.
2.	Aveo	2 WEEKS	45% Filcon II2 & 55% Water Content Soft Contact Lens. 2 weeks frequent/planned replacement contact lens prescribed for daily wear.
3.	Aveo	1 MONTH	50% Filcon II2 & 50% Water Content Soft Contact Lens. 1 month frequent/planned replacement contact lens prescribed for daily wear.

