# FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F95000049661 ALSTOM Transportation Inc. DO NOT WRITE IN THIS SPACE **800015770088** /14/03--01003--020 \*\*19 2. Principal Place of Business 3. Mailing Address 353 Lexington Avenue Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite 1100 City & State City & State 4. FEI Number Applied For 112959993 New York, NY Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 10016 USA 7. Name and Address of Current Registered Agent C T Corporation System DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) 1200 South Pine Island Road IN THIS SPACE City Plantation 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. CONNE BRYAN January 1 - May 1 Fee is \$150.00 **\$5.00** May Be After May 1, Fee is \$550.00 9. Election Campaign Financing Amended UBR is \$61.25 Trust Fund Contribution. Make Check Payable to Florida Department of State 10. SEE ATTACHMENT OFFICERS AND DIRECTORS President/Director TITLE **900015770088** 04/14/03--01003--021 \*\*8.75 Francis Jelensperger NAME NAME 353 Lexington Avenue, Suite 1100, New York, NY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-ST-ZIP VP - Rolling Stock Americas/D irector TITLE THEF Alain Percet MAME NAME One Horton Street, Hornell, NY 14843 STREET ADDRESS STREET ADDRESS CHY-St-7IP CHY-ST-ZIP Senior Vice President/Director TITLE TITLE Stephan Rambaud-Measson MAME NAME 353 Lexington Avenue, Suite 1100, New York, NY STREET ADDRESS STREET ADDRESS DO NOT WRITE 10016 CITY-ST-ZIP CITY-ST-ZIP Treasurer TITLE TITLE IN THIS SPACE Stephen Davies NAME NAME One Horton Street, Hornell, NY 14843 STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP VP - Engineering & Sourcing, RSA TITLE TITLE NAME Jean LeFlour 353 Lexington Avenue, Suite 1100, New York, NY STREET ADDRESS STREET ADDRESS 10016 CITY-ST-ZIP CITY-ST-ZIP VP - Project Management TITLE TITLE

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

NAME

STREET ADDRESS

CITY-ST-7IP

Francis Jelensperger

Wayne Martin

One Transit Drive, Hornell, NY 14843

SIGNATURE AND TYPED OR PRINTED NAME OF SOMING OFFICER OR DIRECTOR

3/19/03

(212)692-5359

FL210 - 1/22/03 C T Filing Manager Online

SIGNATURE:

NAME

STREET ADDRESS CITY-ST-ZIP CR2E034B (12/02)

### Attachment,

#### Attachment to Florida

## **Officers & Directors**

Full Name: Gregory Muscato 1. Officer Officer/Director: Officer's Title: VP - Human Resources **Business Address:** One Transit Drive City: Hornell State: NY ZIP Code: 14843 Full Name: Gary Walsh 2. Officer/Director: Officer Officer's Title: VP - Service N.A. 650 Warrenville Rd **Business Address:** Lisle City: ILState: ZIP Code: 60532 3. Officer's Title: 353 Lexington Avenue, Suite 1100 **Business Address:** New York City: NY State: ZIP Code: 10016 Officer's Title: 4. Business Address: 353 Lexington Avenue, Suite 1100 City: New York State: NY ZIP Code: 10016 5. Full Name: Joseph Janovec Officer Officer/Director: Officer's Title: VP - Finance RSA One Transit Drive Business Address: City: Hornell State: NY ZIP Code: 14843 6. Full Name: Pat Nix Officer/Director: Officer VP - Finance Service, N.A. Officer's Title: 650 Warrenville Rd Business Address: City: Lisle State: ILZIP Code: 60532 Richard Tamborski 7. Full Name: Officer/Director: Officer VP - Service Pts & Logistics Officer's Title: 650 Warrenville Rd Business Address: City: Lisle

IL

Full Name: **Doris Speer** 8.

State:

# Attachment,

Officer/Director:
Officer's Title:
Business Address:

City:

State: ZIP Code:

9., Full Name:

Officer/Director: Officer's Title:

Business Address:

City: State: ZIP Code: Officer Secretary

353 Lexington Avenue, Suite 1100

New York

NY 10016

Fred Einbinder

Officer

Ass't Secretary

353 Lexington Avenue, Suite 1100

New York

NY

10016