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FILED

Jan 24 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P08664

(5)

1. Corporation Name

L S TRANSIT SYSTEMS, INC.



Principal Place of Business

1515 BROAD STREET
BLOOMFIELD NJ 07003-3069
US

Mailing Address

1515 BROAD STREET
BLOOMFIELD NJ 07003-3002
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

3. Date Incorporated or Qualified

12/30/1985

3a. Date of Last Report

02/20/1996

4. FEI Number

22-2593414

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be

Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

☐

Yes

☒

No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of principal officer or director of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME ENGEL, ALBRECHT P.
STREET ADDRESS 1515 BROAD STREET
CITY-ST-ZIP BLOOMFIELD NJ

TITLE V ☐ DELETE

NAME FEINSOD, STANLEY G.
STREET ADDRESS 1515 BROAD STREET
CITY-ST-ZIP BLOOMFIELD NJ

TITLE VT ☐ DELETE

NAME HARTWIG, GARRY A.
STREET ADDRESS 1515 BROAD STREET
CITY-ST-ZIP BLOOMFIELD NJ

TITLE V ☒ DELETE

NAME GEISSENHEIMER, HAROLD H.
STREET ADDRESS 1515 BROAD STREET
CITY-ST-ZIP BLOOMFIELD NJ

TITLE V ☐ DELETE

NAME FORDHAM, DENNIS
STREET ADDRESS 1515 BROAD ST.
CITY-ST-ZIP BLOOMFIELD NJ

TITLE V ☐ DELETE

NAME MANGNUSON, MARY
STREET ADDRESS 1515 BROAD STREET
CITY-ST-ZIP BLOOMFIELD NJ

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☐ Change ☒ Addition

1.2 NAME Totillo, Robert
1.3 STREET ADDRESS 420 Lexington Avenue, Suite 540
1.4 CITY-ST-ZIP New York, NY 10170

2.1 TITLE V ☒ Change ☐ Addition

2.2 NAME Feinsod, Stanley G.
2.3 STREET ADDRESS One Ecker Street, Suite 350
2.4 CITY-ST-ZIP San Francisco, CA 94105-2752

3.1 TITLE TS ☒ Change ☐ Addition

3.2 NAME Hartwig, Garry A.
3.3 STREET ADDRESS 1515 Broad Street
3.4 CITY-ST-ZIP Bloomfield, NJ 07003

4.1 TITLE D ☐ Change ☒ Addition

4.2 NAME Simony, Maurice
4.3 STREET ADDRESS 5 Avenue du Coq
4.4 CITY-ST-ZIP 75009 Paris, France

5.1 TITLE D ☐ Change ☒ Addition

5.2 NAME Rochet, Pierre-Louis
5.3 STREET ADDRESS 5 Avenue du Coq
5.4 CITY-ST-ZIP 75009 Paris, France

6.1 TITLE D ☐ Change ☒ Addition

6.2 NAME Bougard, Jean-Francois
6.3 STREET ADDRESS 21 Bvd. Bourdon
6.4 CITY-ST-ZIP 75004 Paris, France

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)

1-17-97