

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 26, 2013
Secretary of State
CC7472870093

Entity Name: ALSTOM TRANSPORTATION INC.

Current Principal Place of Business:

641 LEXINGTON AVENUE
NEW YORK, NY 10022

Current Mailing Address:

200 GREAT POND DR.
P.O. BOX 500
WINDSOR, CT 06095 US

FEI Number: 11-2949993

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION, FL 33324 US

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, DIRECTOR
Name MEHLMAN, GUILLAUME
Address 641 LEXINGTON AVE
 28TH FLOOR
City-State-Zip: NEW YORK NY 10016

Title SECRETARY
Name MELODY, ISABELLE
Address 801 PENNSYLVANIA AVE.
City-State-Zip: WASHINGTON DC 20004

Title VP, CFO, TREASURER
Name MATSOUKIS, FREDERIC
Address 1025 JOHN STREET
City-State-Zip: WEST HENRIETTA NY 14586

Title VP
Name BRUN-BRUNET, STEPHANIE
Address 641 LEXINGTON AVENUE
City-State-Zip: NEW YORK NY 10022

Title VP
Name GROSJEAN, SEVERINE
Address 641 LEXINGTON AVENUE
City-State-Zip: NEW YORK NY 10022

Title VP
Name HURST, DEREK
Address 1025 JOHN ST.
City-State-Zip: WEST HENREITTA NY 14586

Title VP
Name QUIGLEY, JOSEPH
Address 1025 JOHN ST.
City-State-Zip: WEST HENRIETTA NY 14586

Title VP
Name SHERIN, SCOTT
Address 1025 JOHN ST.
City-State-Zip: WEST HENRIETTA NY 14586

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL J. TOLPA

ASSISTANT TREASURER 04/26/2013

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title ASST. SECRETARY
Name TOILLVER, KAREN
Address 1001 FRONTENAC ROAD
City-State-Zip: NAPERVILLE IL 60563

Title ASST. TREASURER
Name TOLPA, MICHAEL J.
Address 200 GREAT POND DR.
P.O. BOX 500
City-State-Zip: WINDSOR CT 06095

Title DIRECTOR
Name SCHOELWER, WILLIAM F.
Address 801 PENNSYLVANIA AVE.
City-State-Zip: WASHINGTON DC 20004

Title ASST. TREASURER
Name SCE, JOSEPH F.
Address 200 GREAT POND DR.
P.O. BOX 500
City-State-Zip: WINDSOR CT 06095

Title DIRECTOR
Name GAUTHIER, PIERRE L.
Address 801 PENNSYLVANIA AVE.
City-State-Zip: WASHINGTON DC 20004

Title DIRECTOR
Name LE-FOFF, PIERRICK
Address 48, RUE ALBERT DHALENNE
City-State-Zip: SAINT QUEN 93400