

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 30 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # F94000001213 (7)

1. Corporation Name
RAILWAY SYSTEMS DESIGN, INC.

Principal Place of Business
464 S. OLD MIDDLETOWN RD.
MEDIA PA 19063

Mailing Address
P.O. BOX 67100
HARRISBURG PA 17106
US



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
03/10/1994

4. FEI Number
51-0233395

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

24 Country

28 Zip

29 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MYUNG-HAK SUNG
4902 EISENHOWER BLVD.
SUITE 295
TAMPA FL 33634

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE CPD
NAME DRNEVICH, RONALD J
STREET ADDRESS 207 SENATE AVE.
CITY-ST-ZIP CAMP HILL PA ☐ DELETE

1.1 TITLE VTD
1.2 NAME Chester L. Allen
1.3 STREET ADDRESS 319 Candlelight Drive
1.4 CITY-ST-ZIP Mechanicsburg, PA 17055 ☒ Change ☐ Addition

TITLE SVP
NAME ELWOOD T. EVELAND
STREET ADDRESS 3541 HOPKINS DRIVE
CITY-ST-ZIP WILMINGTON DE 19808 ☒ DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE SVD
NAME HOFSSASS, RAYMOND L
STREET ADDRESS 1277 ASH LANE
CITY-ST-ZIP LEBANON PA 17042 ☐ DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VD
NAME DIETZ, ROBERT J
STREET ADDRESS 207 SENATE AVE.
CITY-ST-ZIP CAMP HILL PA 17011 ☐ DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE AS
NAME SYLVIA E. WEINSTEIN
STREET ADDRESS 160 CHERRY LANE
CITY-ST-ZIP ABBOTTS TOWN PA ☐ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VT
NAME ALLEN, CHESTER L
STREET ADDRESS 503 EAST ELMWOOD AVENUE, APT. 4
CITY-ST-ZIP MECHANICSBURG PA 17055 ☐ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

14. I 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: Sylvia Weinstein

4/15/98 (717) 763-7211

CR2E034 (10/97)