

**2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F04000007299

**Entity Name:** KAPSCH TRAFFICOM USA, INC.

**Current Principal Place of Business:**

2855 PREMIERE PARKWAY  
SUITE F  
DULUTH, GA 30097

**FILED**  
**Apr 15, 2017**  
**Secretary of State**  
**CC9719781592**

**Current Mailing Address:**

2855 PREMIERE PARKWAY  
SUITE F  
DULUTH, GA 30097 US

**FEI Number: 68-0312720**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
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           DIRECTOR  
Name           PLASCHKA, GERHARD  
Address        8201 GREENSBORO DRIVE  
                  SUITE 1002  
City-State-Zip: MCLEAN VA 22102

Title           SECRETARY  
Name           EICHERS, JANET  
Address        2855 PREMIERE PARKWAY  
                  SUITE F  
City-State-Zip: DULUTH GA 30097

Title           TREASURER/CFO/DIRECTOR  
Name           HOFER, MICHAEL  
Address        8201 GREENSBORO DRIVE  
                  SUITE 1002  
City-State-Zip: MCLEAN VA 22102

Title           PRESIDENT/CEO/DIRECTOR  
Name           MURRAY, CHRISTOPHER  
Address        8201 GREENSBORO DRIVE  
                  SUITE 1002  
City-State-Zip: MCLEAN VA 22102

*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: CHRISTOPHER MURRAY**

**PRESIDENT/CEO/DIRECTOR   04/15/2017**  
**OR**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date