

**2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F10000002324

**Entity Name:** TRANSDEV RAIL, INC.

**Current Principal Place of Business:**

720 E. BUTTERFIELD ROAD  
SUITE 300  
LOMBARD, IL 60148

**Current Mailing Address:**

720 E. BUTTERFIELD ROAD  
SUITE 300  
LOMBARD, IL 60148 US

**FEI Number:** 26-2369507

**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           LAHERRE, JACQUES  
Address        720 E. BUTTERFIELD ROAD  
                  SUITE 300  
City-State-Zip: LOMBARD IL 60148

Title           TREASURER  
Name           DYBEL, ANDY  
Address        720 E. BUTTERFIELD ROAD  
                  SUITE 300  
City-State-Zip: LOMBARD IL 60148

Title           SECRETARY, DIRECTOR  
Name           STEFFES, LARRY  
Address        720 E. BUTTERFIELD ROAD  
                  SUITE 300  
City-State-Zip: LOMBARD IL 60148

Title           DIRECTOR  
Name           ESKIERKA, DUANE  
Address        720 E. BUTTERFIELD ROAD  
                  SUITE 300  
City-State-Zip: LOMBARD IL 60148

*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:** STEFFES, LARRY

**SECRETARY**

**03/23/2019**

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

\_\_\_\_\_  
Date