

1.) CORPORATION NAME:

**ALSTOM Signaling Inc.**

DUE DATE: **6/30/2015**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM  
4701 COX ROAD, SUITE 285  
GLEN ALLEN, VA**

SCC ID NO: **F1179219**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1025 JOHN STREET

CITY/ST/ZIP: WEST HENRIETTA, NY 14586-9781

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

<p>NAME: XINHONG LUO TITLE: PRESIDENT ADDRESS: 1025 JOHN STREET CITY/ST/ZIP/CO: WEST HENRIETTA, NY 14586</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: ELLEN M O'NEILL TITLE: VP/SECRETARY ADDRESS: 1025 JOHN STREET CITY/ST/ZIP/CO: WEST HENRIETTA, NY 14586-9781</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: JOSEPH F. SCE TITLE: ASST TREASURER ADDRESS: 200 GREAT POND DR. CITY/ST/ZIP/CO: WINDSOR, CT 06095</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: MICHAEL TOLPA TITLE: TREASURER ADDRESS: 200 GREAT POND DRIVE CITY/ST/ZIP/CO: WINDSOR, CT 06095</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: FREDERIC MATSOUKIS TITLE: CFO ADDRESS: 1025 JOHN STREET CITY/ST/ZIP/CO: WEST HENRIETTA, NY 14586</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: GUILLAUME MEHLMAN TITLE: DIRECTOR ADDRESS: 353 LEXINGTON AVE STE 1100 CITY/ST/ZIP/CO: NEW YORK, NY 10016</p>	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: WILLIAM SCHOELWER  OFFICER  DIRECTOR  
TITLE: DIRECTOR  
ADDRESS: 801 PENNSYLVANIA AVE.  
CITY/ST/ZIP/CO: WASHINGTON, DC 20004

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

<u>/s/ JOSEPH F. SCE</u>	<u>JOSEPH F. SCE, ASST</u>	<u>5/27/2015</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	TREASURER PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.