

| | | |
|------------------|---|-----------|
| SCC eFile | 2013 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION | 213517892 |
|------------------|---|-----------|

| | |
|---|---|
| 1.) CORPORATION NAME: Kustom Signals, Inc. | DUE DATE: 5/31/2013 |
| 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CT CORPORATION SYSTEM 4701 COX RD STE 301 GLEN ALLEN, VA | SCC ID NO: F1472036 |
| 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY | 5.) STOCK INFORMATION CLASS <input type="text"/> AUTHORIZED <input type="text"/> |
| 4.) STATE OR COUNTRY OF INCORPORATION: KS | |

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 9652 LOIRET BLVD

CITY/ST/ZIP: LENEXA, KS 66219-2406

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.

| | | | | |
|------------------------------------|--------------------------|---------|-------------------------------------|----------|
| NAME: ANDREW R MILNER | <input type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
| TITLE: DIRECTOR | | | | |
| ADDRESS: 10986 N WARSON RD | | | | |
| CITY/ST/ZIP/CO: ST LOUIS, MO 63114 | | | | |

| | | | | |
|---------------------------------------|-------------------------------------|---------|-------------------------------------|----------|
| NAME: CHRIS N ABEL | <input checked="" type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
| TITLE: VICE PRESIDENT | | | | |
| ADDRESS: 9652 LOIRET BLVD | | | | |
| CITY/ST/ZIP/CO: LENEXA, KS 66219-2406 | | | | |

| | | | | |
|------------------------------------|-------------------------------------|---------|--------------------------|----------|
| NAME: KEITH D KNIPEKAMP | <input checked="" type="checkbox"/> | OFFICER | <input type="checkbox"/> | DIRECTOR |
| TITLE: VICE PRESIDENT | | | | |
| ADDRESS: 10986 N WARSON RD | | | | |
| CITY/ST/ZIP/CO: ST LOUIS, MO 63114 | | | | |

| | | | | |
|---|-------------------------------------|---------|--------------------------|----------|
| NAME: JOHN P STERRENBURG | <input checked="" type="checkbox"/> | OFFICER | <input type="checkbox"/> | DIRECTOR |
| TITLE: VP/S/T | | | | |
| ADDRESS: 10986 N WARSON RD | | | | |
| CITY/ST/ZIP/CO: ST LOUIS, MO 63114-2029 | | | | |

| | | | | |
|---------------------------------------|-------------------------------------|---------|-------------------------------------|----------|
| NAME: Stephanie West | <input checked="" type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
| TITLE: PRESIDENT | | | | |
| ADDRESS: 9652 Loiret Blvd | | | | |
| CITY/ST/ZIP/CO: Lenexa, KS 66219-2406 | | | | |

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.

| | | |
|---|----------------------------------|-----------|
| /s/ JOHN P STERRENBURG | JOHN P STERRENBURG, VP/S/T | 4/15/2013 |
| SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | 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.