

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000098251

FILED  
Apr 20, 2007  
Secretary of State

**Entity Name:** HAWAIIAN AIR & PIPELINE SPECIALTIES, INC

**Current Principal Place of Business:**

19995 N.E. 10 PLACE WAY  
MIAMI, FL 33179

**New Principal Place of Business:**

**Current Mailing Address:**

19995 N.E. 10 PLACE WAY  
MIAMI, FL 33179

**New Mailing Address:**

**FEI Number:** 56-2602875

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KAVOLCHYCK, MICHAEL  
19995 N.E. 10 PLACE WAY  
MIAMI, FL 33179 US

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

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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: KAVOLCHYCK, JILL  
Address: 19995 N.E. 10 PLACE WAY  
City-St-Zip: MIAMI, FL 33179

Title: P ( ) Delete  
Name: KAVOLCHYCK, MICHAEL  
Address: 19995 NE 10 PL WAY  
City-St-Zip: MIAMI, FL 33179

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES (X) Change ( ) Addition  
Name: KAVOLCHYCK, MICHAEL  
Address: 19995 N.E. 10 PLACE WAY  
City-St-Zip: MIAMI, FL 33179

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

**SIGNATURE:** MICHAEL KAVOLCHYCK

PRES

04/20/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date