

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P28394 (5)

1. Corporation Name

WESTINGHOUSE AIR BRAKE COMPANY



Principal Place of Business

1209 ORANGE ST.
WILMINGTON DE 19801

Mailing Address

1209 ORANGE ST.
WILMINGTON DE 19801

3. Date Incorporated or Qualified
03/06/1990

3a. Date of Last Report
04/27/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, type or print name of officer or director who signs this report

(If filer is Registered Agent, signature required when reinstating)

Date

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

PD
KASSLING, WILLIAM E.
540 SQUAW RUN RD E
PHILADELPHIA PA

DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

VSD
BROOKS, ROBERT J.
3465 TREELINE DR
MURRYSVILLE PA

DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D
BROOKS, ROBERT J.
3465 TREELINE DR
MURRYSVILLE PA

DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

V
ROSNER, ROBERT L.
145 E. 45TH ST.
NEW YORK NY

DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

VD
KELLY, JAMES P
1900 E 7TH AVE
DENVER CO

DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP

PITTSBURGH, PA

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

245 PARK AVE

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

KELLEY
1225 17th ST., STE. 1660

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-7-96

412-825-1000