## **2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)**

## DOCUMENT #P28394

1. Entity Name

## WESTINGHOUSE AIR BRAKE TECHNOLOGIES CORPORATION



**FILED** 

Jul 31, 2007 8:00 am Secretary of State

07-31-2007 90008 016 \*\*\*150.00

			The state of the s	photos of the same					
Principal Plac	e of Business	Mailing Address							
1001 AIR BRAKE AVENUE WILMERDING PA 15148		1001 AIR BRAKE AVENUE WILMERDING PA 15148							
2. Principal Place of Business - No P.O Box #		3. Mailing Address			B))BO) ))B   481 (4(48 H) 8 (4H) 9	1146 ETA14 ETA11 BI	IBII BIBLI BLEH BIE		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		2	2nd MOORE CR2E034 (4/07)				
City & State		City & State		4. FEI Num	25 1615002		pplied For of Applicable		
Zip	Country	Zıp	Country	5. Certificate of Status Desired			\$8.75 Additional Fee Required		
	6. Name and Address of Curren	t Registered Agent	ed Agent		7. Name and Address of New Registered Agen			nt	
				Name					
1201	RPORATION SERVICE COM 1 HAYS STREET LAHASSEE FL 32301	PANY	Street Address		ber is Not Acceptable	<del>)</del>			
			City		FL Zip Code				
	named entity submits this statement itions of registered agent.	for the purpose of changing (	ts registered office o	r registered agent, or b	ooth, in the State of Flo	orida Tarn	farnılıar with	, and accept	
SIGNATURE	Signature, typed or brinted name of registered agei	я ала Inv. d аррікавів — (INC	DIE Registered Agent signa	Ture required when reinstating)		DAIE	· · ·-		
Make Checi	ILE NOW!!! FEE IS \$550.00 DUE BY September 5, 2007 k Payable to Florida Department	of State late fee. By che did not receive	ecking this box, the operation of the control of th		9. Election Campa Trust Fund Con	ntribution	Add	.00 May Be led to Fees	
10.	OFFICERS AND		11.		S/CHANGES TO OFF	ICERS ANL			
TITLE	Denomination of the second	☐ Detete	TITLE	17/0			Change	Addition	
	NEUPAVER, ALBERT		NAME						
	1001 AIR BRAKE AVE		STREET ADDRESS						
CITY-ST-ZIP	WILMERDING PA 15148		CITY-ST-ZIP					· — - · · · · ·	
TITLE	<b>S</b>	☐ Delete	TIFLE	VIS			<b>Change</b>	Addition	
NAME	GARCIA-TUNON, ALVARO		NAME						
	1001 AIR BRAKE AVE		STREET ADDRESS						
CITY-ST-ZIP	WILMERDING PA 15148		CITY-ST-ZIP						
TITLE	ከ	☐ Delete	TITLE	VIT			Change	☐ Addition	
NAME	HILDUM, KEITH		NAME				•		
STREET ADDRESS	1001 AIR BRAKE AVE		STREET ADDRESS						
CITY-ST-ZIP	WILMERDING PA 15148		CITY - ST- ZIP						
TITLE	VP	☐ Delete	THEE				Change	Addition	
	SOCHER, GEORGE A	_ 201010	NAME						
	1001 AIR BRAKE AVE		STREET ADDRESS						
	WILMERDING PA 15148		CITY-ST-ZIP						
TITLE	D	☐ Delete	TITLE				Change	Addition	
NAME	FERNANDEZ, EMILIO A	□ Delete	NAME					L-J AUGITURI	
	1001 AIR BRAKE AVE		STREET ADDRESS						
CINCLINEDING	WILMERDING PA 15148		CITY-SI-ZIP						
VIII 01 EII		<u> </u>		<b>N</b>				<del></del>	
THILL	DAVIS KIM G	💢 Delete	TITLE	D			☐ Change	X Addition	
10 1111	DAVIS, KIM G	•	NAME	MILLIAM E. KI					
STREET ADDRESS 1001 AIR BRAKE AVE		STREET ADDRESS	1001 AVE BEA						
CITY-ST-ZIP	WILMERDING PA 15148		CITY-ST-ZIP	MILMERDING	BH181 49.				

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/14/07 412 835 1700
Date Dayline Phone #