

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P21387** (6)

1. Corporation Name  
**DAN-TRANSPORT CORPORATION**



Principal Place of Business: **850 CENTER DRIVE ELIZABETH NJ 07201-9116 US**  
Mailing Address: **850 CENTER DRIVE ELIZABETH NJ 07201-9116 US**

2. Principal Place of Business: 21 Suite, Apt. #, etc.; 22 City & State; 23 Zip; 24 Country  
2a. Mailing Address: 26 Suite, Apt. #, etc.; 27 City & State; 28 Zip; 29 Country

9. Name and Address of Current Registered Agent

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

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
85 Zip Code **FL**

3. Date Incorporated or Qualified: **10/21/1988**  
3a. Date of Last Report: **04/18/1995**  
4. FEI Number: **22-2301684**  
Applied For:  Not Applicable  
5. Certificate of Status Desired:  **\$8.75 Additional Fee Required**  
6. Election Campaign Financing Trust Fund Contribution:  **\$5.00 May Be Added to Fees**  
8. This corporation has liability for intangible tax under s. 193.032, Florida Statutes:  Yes  No  
10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0502 and 607.1509, 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		DATE	
12. OFFICERS AND DIRECTORS			
TITLE	PDS	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MOLLER, JORGEN	1.2 NAME	
STREET ADDRESS	5 IVY LANE	1.3 STREET ADDRESS	
CITY, ST, ZIP	MANALAPAN NH	1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	T	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PETERSEN, SOREN	2.2 NAME	
STREET ADDRESS	8 DEFORREST PLACE	2.3 STREET ADDRESS	
CITY, ST, ZIP	WEST LONG BRANCH NJ	2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	D	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ANDERSEN, BJARNE	3.2 NAME	
STREET ADDRESS	28 CHR. BRYGGE DK-1559	3.3 STREET ADDRESS	
CITY, ST, ZIP	COPENHAGEN, DENMARK	3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	D	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JACOBSEN, JESPER	4.2 NAME	
STREET ADDRESS	28 CHR. BRYGGE DK-1559	4.3 STREET ADDRESS	
CITY, ST, ZIP	COPENHAGEN, DENMARK	4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	D	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TROLLE, OLE	5.2 NAME	
STREET ADDRESS	28 CHR. BYGLE OK-1559	5.3 STREET ADDRESS	
CITY, ST, ZIP	COPENHAGEN DE	5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY, ST, ZIP		6.4 CITY-ST-ZIP	
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			

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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: 2/29/96 201-435-7500  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

CR2E034 (12/95)