

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 25 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P21387 (6)
 1. Corporation Name
DAN-TRANSPORT CORPORATION



Principal Place of Business 1210 CORBIN ST. ELIZABETH NJ 07201-9116 US	Mailing Address 1210 CORBIN ST. ELIZABETH NJ 07201-9116 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/21/1988	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 22-2301684	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

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
				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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P <input type="checkbox"/> DELETE	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	
TITLE	T <input type="checkbox"/> DELETE	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	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ANDERSEN, BJARNE	3.2 NAME	
STREET ADDRESS	28 CHR. BRYGGE DK-1550	3.3 STREET ADDRESS	12-20 KORNMARKSVEJ
CITY-ST-ZIP	COPENHAGEN, DENMARK	3.4 CITY-ST-ZIP	DK-2600 GLOSTRUP, DENMARK
TITLE	D <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JACOBSEN, JESPER	4.2 NAME	BENNY RHE HANSEN
STREET ADDRESS	28 CHR. BRYGGE DK-1550	4.3 STREET ADDRESS	12-20 KORNMARKSVEJ,
CITY-ST-ZIP	COPENHAGEN, DENMARK	4.4 CITY-ST-ZIP	DK-2600 GLOSTRUP, DENMARK
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TROLLE, OLE	5.2 NAME	
STREET ADDRESS	28 CHR. BRYGGE DK-1550	5.3 STREET ADDRESS	12-20 KORNMARKSVEJ
CITY-ST-ZIP	COPENHAGEN DE	5.4 CITY-ST-ZIP	DK-2600 GLOSTRUP, DENMARK
TITLE	<input type="checkbox"/> DELETE	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	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Soren Pedersen **SOREN PEDERSEN** 2/18/98 908-353-0800

CR2E034 (10/97)