

75-19-1999 90020 007... 600.00

FILE NOW: FILING FEE AFTER MAY 1ST IS \$650.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P98000060469			
1. Corporation Name DANGEROUS GOODS PACKAGING AND DISTRIBUTORS, CORP			
Principal Place of Business 6921 N.W. 87TH AVENUE MIAMI FL 33178		Mailing Address 6921 N.W. 87TH AVENUE MIAMI FL 33178	
DO NOT WRITE IN THIS SPACE			
2. Principal Place of Business		3. Date Incorporated or Qualified 07/08/1998	
2a. Mailing Address		4. FEI Number	
2b. Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
2c. City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
2d. Zip		7. This corporation owes the current year intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No	
2e. Country			
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
SILVA, ALFREDO 6921 N.W. 87TH AVENUE MIAMI FL 33178		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			
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)			
DATE			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 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, with all other like names.

SIGNATURE

[Signature] Pres. Ant. 60/512-4422 5/1/99

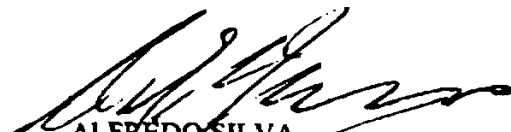
TO: FLORIDA DEPT. OF STATE
P.O. BOX 6327
TALLAHASSEE, FL 32314

11-24-99

REF: 1. DANGEROUS GOODS PACKAGING & DISTRIBUTORS CORP. *p98*
2. EXPEDITED FREIGHT SYSTEMS, INC.
3. TRANSPRO LOGISTICS, INC.

TO WHOM IT MAY CONCERN:

ON 10-28-99 AN AMENDMENT WAS SUBMITTED TO YOUR OFFICE TO BE PROCESSED FOR TRANSPRO LOGISTIC, INC. DOC.#P98000075365 BUT DOCUMENT WAS RETURNED FOR THE FOLLOWING REASON CORPORATION WAS ADMINISTRATIVE DISSOLVED FOR ANNUAL REPORT. MY OFFICE NEVER RECEIVED THE ORIGINAL DOCUMENT NOR REJECT LETTER CONCERNING THIS MATTER THEREFORE PLEASE ACCEPT THE ENCLOSED COPIES OF THE ANNUAL REPORTS TO BE FILED INSTEAD WITH NECESSARY CORRECTIONS. IF YOU SHOULD HAVE ANY QUESTIONS REGARDING THIS LETTER DON'T HESITATE TO CONTACT ME. THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER.


ALFREDO SILVA
PRESIDENT

attn: Loria Poole