2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 21, 2004
Secretary of State

DOCUMENT# H26517

Entity Name: DIAGRA POULTRY, INC.

Current Principal Place of Business:

HAYNES RD.
P.O.BOX 600
DOVER, FL 33527

New Principal Place of Business:

14425 HAYNES RD.
P.O.BOX 600
DOVER, FL 33527

Current Mailing Address:

HAYNES RD.
P.O.BOX 600
DOVER, FL 33527

New Mailing Address:

14425 HAYNES RD.
P.O.BOX 600
DOVER, FL 33527

FEI Number: 59-2471352 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BYNUM, MICHAEL H
HAYNES RD.
DOVER, FL 33527 US

Name and Address of New Registered Agent:

BYNUM, MICHAEL H
14425 HAYNES RD.
P O BOX 600
DOVER, FL 33527 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: 01/21/2004
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: BYNUM, MICHAEL,
Address: HAYNES RD
City-St-Zip: DOVER, FL

Title: VP ( ) Delete
Name: BYNUM, SAMUEL,
Address: HAYNES RD
City-St-Zip: DOVER, FL

Title: ST ( ) Delete
Name: BYNUM, BLAIR,
Address: HAYNES RD
City-St-Zip: DOVER, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: BYNUM, MICHAEL,
Address: HAYNES RD
City-St-Zip: DOVER, FL

Title: VPD (X) Change ( ) Addition
Name: BYNUM, SAMUEL,
Address: HAYNES RD
City-St-Zip: DOVER, FL

Title: STD (X) Change ( ) Addition
Name: BYNUM, BLAIR,
Address: HAYNES RD
City-St-Zip: DOVER, FL

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL H. BYNUM PD 01/21/2004
Electronic Signature of Signing Officer or Director — Date