2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000028377

Entity Name: DAR, U.S.A., INC.

FILED Apr 27, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5259 S. FLORIDA AVE LAKELAND, FL 33810

Current Mailing Address: New Mailing Address:

PO BOX 1190 RIVERVIEW, FL 33568

FEI Number: 59-3445956 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ABUEMAISH, AMJED
5259 S. FLORIDA AVE
LAKELAND, FL 33813

ABUEMAISH, JED
5259 S. FLORIDA AVE
LAKELAND, FL 33813

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: JA 04/27/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 ABUAMAISH, MAJED
 Name:
 ABUAMAISH, MAJED

 Address:
 PO BOX 1190
 Address:
 PO BOX 372

City-St-Zip: RIVERVIEW, FL 33569 City-St-Zip: RIVERVIEW, FL 33569

Title: VP () Delete Title: VP (X) Change () Addition Name: ABUAMAISH, MAJED Name: EMAISH, JED

 Address:
 PO BOX 372
 Address:
 PO BOX 372

 City-St-Zip:
 RIVERVIEW, FL 33568
 City-St-Zip:
 RIVERVIEW, FL 33568

Title: S () Delete Title: S (X) Change () Addition

 Name:
 ABUEMAISH, AMJED
 Name:
 EMAISH, JED

 Address:
 PO BOX 1190
 Address:
 PO BOX 1190

Address: PO BOX 1190 Address: PO BOX 1190 City-St-Zip: RIVERVIEW, FL 33568 City-St-Zip: RIVERVIEW, FL 33568

Title: T () Delete Title: T (X) Change () Addition

 Name:
 AABUEMAISH, AMJED
 Name:
 EMAISH, JED

 Address:
 P.O. BOX 1190
 Address:
 P.O. BOX 1190

 City-St-Zip:
 RIVERVIEW, FL 33568
 City-St-Zip:
 RIVERVIEW, FL 33568

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: JE S 04/27/2004