2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008
Secretary of State

DOCUMENT# F03000003325

Entity Name: KIMC INVESTMENTS, INC.

Current Principal Place of Business:

C/O MEDVANCE INSTITUTE 1401 FORUM WAY
STE 600
WEST PALM BEACH, FL 33401

New Principal Place of Business:

Current Mailing Address:

C/O MEDVANCE INSTITUTE 1401 FORUM WAY
STE 600
WEST PALM BEACH, FL 33401

New Mailing Address:

FEI Number: 20-0072171 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	PD	( ) Delete
Name:	SCHWARZBERG, DEBORAH KANN	
Address:	1401 FORUM WAY	
City-St-Zip:	WEST PALM BEACH, FL 33401	
Title:	D	( ) Delete
Name:	FRED WEISS, DAVID GRAY	
Address:	1401 FORUM WAY SUITE 600	
City-St-Zip:	WEST PALM BEACH, FL 33401	
Title:	D	( ) Delete
Name:	JENNINGS, MARK E	
Address:	ONE GREENWICH OFFICE PARK	
City-St-Zip:	GREENWICH, CT 068315156	
Title:	D	( ) Delete
Name:	CAMPBELL, PETER	
Address:	ONE GREENWICH OFFICE PARK	
City-St-Zip:	GREENWICH, CT 068315156	
Title:	D	( ) Delete
Name:	L ACKERBERG, C SALADRIGAS	
Address:	1401 FORUM WAY STE 600	
City-St-Zip:	WEST PALM BEACH, FL 33401	
Title:	CEO	( ) Delete
Name:	HOPKINS, JOHN	
Address:	1401 FORUM WAY, SUITE 600	
City-St-Zip:	WEST PALM BEACH, FL 33401	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: BILL BENHAM CFO 04/28/2008

Electronic Signature of Signing Officer or Director — Date