2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

Apr 29, 2005 08:00 AM Secretary of State DOCUMENT # L49350 1. Entity Name KIMCO INDUSTRIES, INC. Principal Place of Business Mailing Address 257 NE 32 COURT FT LANDERDALE FL 33334 US 257 NE 32 COURT FT LAUDERDALE FL 33334 2. Principal Place of Business 3. Mailing Address Suite, Apt #, etc. Suite, Apr #, etc 1st MOORE CR2E034 (10/04) City & State City & State 4. FEI Number Applied For 65-0174458 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DALE, CHARLES S., JR. Street Address (P.O. Box Number is Not Acceptable) 701 W. CYPRESS CREEK ROAD SUITE 301 FT. LAUDERDALE FL 33309 Zip Code 8. The above named entity sidomits this stepment for the purpose of changing its registered office or registered agent, or both, in the State of Florida 1 am famillar with, and accept the obligations DATE (NOTE Registered Agent signature required when teinstating) FILE NOW!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. MILE ☐ Delete THILF Change Addition BICKMORE, BARRY NAME NAM STREET ADDRESS 5540 OAKWOOD ROAD STREET ADDRESS CITY-ST-ZIP FT. LAUDERDALE FL CITY-ST-7IP VPS THILE Delete THIE Change ☐ Addition U00000342851 04/29/05-80073-001 150.00 BICKMORE, KIRK NAME MAME 5540 OAKWOOD RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE FL CIEY+ST-ZIP Delete HILE THE Change Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete THE Change ☐ Addition MAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST- ZIP HILL Delete THUE 🔲 Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-SI-ZIP TITLE Delete TITLE Change AGGIS NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP COLY-SI- ZIE 12. 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 report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under cath, 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 10 or Block 11 changed, or on an attachment with an address, with all other rike empowered.

FILED