

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000003827

Entity Name: CORSICA SQUARE HOLDCO, LLC

FILED
Apr 23, 2008
Secretary of State

Current Principal Place of Business:

333 NEW HYDE PARK ROAD
NEW HYDE PARK, NY 11042

New Principal Place of Business:

3333 NEW HYDE PARK ROAD
SUITE 100
NEW HYDE PARK, NY 11042

Current Mailing Address:

333 NEW HYDE PARK ROAD
NEW HYDE PARK, NY 11042

New Mailing Address:

3333 NEW HYDE PARK ROAD
SUITE 100
NEW HYDE PARK, NY 11042

FEI Number: 20-8246086

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: KIMCO CORSICA SQUARE, 1571, INC.
Address: 333 NEW HYDE PARK ROAD
City-St-Zip: NEW HYDE PARK, NY 11042

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: KUBS INCOME FUND II, BUSINESS TRUST
Address: 3333 NEW HYDE PARK ROAD SUITE 100
City-St-Zip: NEW HYDE PARK, NY 11042

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: CRYSTAL FICKEN

POA

04/23/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date