

1.) CORPORATION NAME: <b>K.B. Industries, Inc.</b>	DUE DATE: <b>11/30/2013</b>				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>KEITH B BOONE 7191 OLD FORGE RD ROCKY MOUNT, VA</b>	SCC ID NO: <b>05492087</b>				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>FRANKLIN COUNTY</b>	5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%;">CLASS</th> <th style="width: 50%;">AUTHORIZED</th> </tr> <tr> <td>COMMON</td> <td>4,500</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	4,500
CLASS	AUTHORIZED				
COMMON	4,500				
4.) STATE OR COUNTRY OF INCORPORATION: <b>VA</b>					

6.) PRINCIPAL OFFICE ADDRESS:  ADDRESS: 7191 OLD FORGE RD  CITY/ST/ZIP: ROCKY MOUNT, VA 24151	
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7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: KEITH BOONE		
TITLE: PRESIDENT		
ADDRESS: 7191 OLD FORGE RD		
CITY/ST/ZIP/CO: ROCKY MOUNT, VA 24151		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: MIMI BOONE		
TITLE: VICE PRESIDENT		
ADDRESS: 7191 OLD FORGE RD		
CITY/ST/ZIP/CO: ROCKY MOUNT, VA 24151		

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ KEITH BOONE	KEITH BOONE, PRESIDENT	3/31/2014
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.