

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 813363

FILED  
Jan 09, 2007  
Secretary of State

Entity Name: KERZNER INTERNATIONAL NORTH AMERICA, INC.

**Current Principal Place of Business:**

1000 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 333243907 US

**New Principal Place of Business:**

1000 SOUTH PINE ISLAND ROAD  
SUIITE 800  
PLANTATION, FL 333243907 US

**Current Mailing Address:**

1000 SOUTH PINE ISLAND ROAD  
#800  
PLANTATION, FL 33324 US

**New Mailing Address:**

FEI Number: 59-0763055      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CORPORATION SERVICE CO.  
1201 HAYS STREET  
10TH FLOOR  
TALLAHASSEE, FL 32301 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: TDEV ( ) Delete  
Name: ALLISON, J.R.  
Address: 1000 S PINE ISLAND RD #800  
City-St-Zip: PLANTATION, FL 33324

Title: ASV ( ) Delete  
Name: MURTHA, W.C.  
Address: 2106 NEW ROAD C7  
City-St-Zip: LINWOOD, NJ 08221

Title: SVPC ( ) Delete  
Name: ROBERTSON, ANNE  
Address: 1000 SPINE ISLEN RD #800  
City-St-Zip: PLANTATION, FL 33324

Title: DVP ( ) Delete  
Name: LEVINE, RICHARD M  
Address: 730 FIFTH AVE 5TH FL  
City-St-Zip: NEW YORK, NY 10019

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: SVPC (X) Change ( ) Addition  
Name: ROBERTSON, ANNE  
Address: 1000 S PINE ISLAND RD #800  
City-St-Zip: PLANTATION, FL 33324

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

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN ALLISON

TDEV

01/09/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date