2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#813363

Entity Name: KERZNER INTERNATIONAL NORTH AMERICA, INC.

FILED Feb 24, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
1000 SOUTH PINE ISLAND ROAD SUIITE 800 PLANTATION, FL 33324 US				1000 SOUTH PINE ISLAND ROAD SUITE 800		
				PLANTATION, FL 33324 US		
Current Mailing Address:				New Mailing Address:		
1000 SOUT SUITE 800	H PINE ISLAND ROAD			1000 SOUTH PINE ISLAND ROAD SUITE 800		
	ON, FL 33324	US		PLANTATION, FL 3332		US
FEI Number:	59-0763055	FEI Number Applied For ()	FEI Nun	nber Not Appli	cable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
1201 HAYS 10TH FLOO TALLAHAS	OR ISEE, FL 32301	US				
in the State		bmits this statement for the pui	rpose o	f changing it	s registered offi	ice or registered agent, or both,
SIGNATUR	RE:					
Electronic Signature of Registered Agent				Date		
Election Cam	paign Financing 1	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	ame: BIUMI, BONNIÉ Idress: 1000 S PINE ISLAND RD #800			Title: Name: Address: City-St-Zip:	()(Change () Addition
Title: Name: Address: City-St-Zip:	COTTER, ROBER	E ISLAND ROAD SUITE 800		Title: Name: Address: City-St-Zip:	MIRMAN, RICHAR	E ISLAND ROAD SUITE 800
Title: Name: Address: City-St-Zip:	EVP () D DIGILIO, MONICA 1000 S PINE ISLA PLANTATION, FL	ND RD #800		Title: Name: Address: City-St-Zip:	()(Change()Addition
Title: Name: Address: City-St-Zip:	DVP () D LEVINE, RICHARI 730 FIFTH AVE 5 NEW YORK, NY	D M TH FL		Title: Name: Address: City-St-Zip:	() (Change () Addition
Title: Name: Address: City-St-Zip:	MURTHA, WILLIA	E ISLAND RD. SUITE 800		Title: Name: Address: City-St-Zip:	JONES, CATHER	E ISLAND RD. SUITE 800
Title: Name: Address: City-St-Zip:	ROBERTSON, AN	E ISLAND ROAD, SUUITE 800		Title: Name: Address: City-St-Zip:	()(Change () Addition

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: BONNIE BIUMI DIR 02/24/2009