

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000005035

FILED
Jan 27, 2009
Secretary of State

Entity Name: KERZNER INTERNATIONAL MANAGEMENT SERVICES, INC.

Current Principal Place of Business:

1000 SOUTH PINE ISLAND ROAD 8TH FL
PLANTATION, FL 33324

New Principal Place of Business:

1000 SOUTH PINE ISLAND ROAD
SUITE 800
PLANTATION, FL 33324

Current Mailing Address:

1000 S. PINE ISLAND ROAD
#800
PLANTATION, FL 33324

New Mailing Address:

1000 SOUTH PINE ISLAND ROAD
SUITE 800
PLANTATION, FL 33324

FEI Number: 41-2061854

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: DEVP () Delete
Name: BIUMI, BONNIE
Address: 1000 S. PINE ISLAND ROAD #800
City-St-Zip: PLANTATION, FL 33324

Title: DVP () Delete
Name: LEVINE, RICHARD
Address: 750 FIFTH AVENUE 5TH FLOOR
City-St-Zip: NEW YORK, NY 10019

Title: VPS () Delete
Name: MURTHA, WILLIAM C
Address: 1000 S. PINE ISLAND ROAD, #800
City-St-Zip: PLANTATION, FL 33324

Title: SPTS () Delete
Name: ROBERTSON, ANNE
Address: 1000 S. PINE ISLAND ROAD, #800
City-St-Zip: PLANTATION, FL 33324

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VPS (X) Change () Addition
Name: JONES, CATHERINE
Address: 1000 S. PINE ISLAND ROAD, #800
City-St-Zip: PLANTATION, FL 33324

Title: VP (X) Change () Addition
Name: PALACIOS, OMAR
Address: 1000 S. PINE ISLAND ROAD, #800
City-St-Zip: PLANTATION, FL 33324

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

01/27/2009

Electronic Signature of Signing Officer or Director

Date