## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F02000005040

Entity Name: KERZNER INTERNATIONAL DEVELOPMENT SERVICES, INC.

FILED Jan 27, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
1000 SOUTH PINE ISLAND ROAD - 8TH FLOOR ROYAL PALM I AT SOUTHPOINT PLANTATION, FL 33324				1000 SOUTH PINE ISLAND ROAD 800 PLANTATION, FL 33324		
Current Mailing Address:				New Mailing Address:		
1000 SOUTH PINE ISLAND ROAD - 8TH FLOOR ROYAL PALM I AT SOUTHPOINT PLANTATION, FL 33324			1000 SOUTH PINE ISLAND ROAD 800 PLANTATION, FL 33324			
FEI Number:	41-2061851	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:		
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US  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.						
SIGNATUR	RE:					
Electronic Signature of Registered Agent				Date		
Election Can	npaign Financing	Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	BIUMI, BONNIÉ	Delete NE ISLAND ROAD - 8TH FLOOR - 33324		Title: Name: Address: City-St-Zip:	(	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	BOOCHER, JAM	NE ISLAND ROAD - 8TH FLOOR		Title: Name: Address: City-St-Zip:	(	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	MURTHA, WILLI	NE ISLAND ROAD - 8TH FLOOR		Title: Name: Address: City-St-Zip:	JONES, CATH	PINE ISLAND ROAD - 8TH FLOOR
Title: Name: Address: City-St-Zip:	ROBERTSON, A	NE ISLAND ROAD - 8TH FLOOR		Title: Name: Address: City-St-Zip:	PALACIOS, C	PINE ISLAND ROAD - 8TH FLOOR
Title: Name: Address:	VP () LEVINE, RICHAF 730 FIFTH AVE			Title: Name: Address:	(	( ) 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.

City-St-Zip:

SIGNATURE: BONNIE BIUMI DIR 01/27/2009

NEW YORK, NY 10019

City-St-Zip: