

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000000664

Entity Name: CIRQUE DU SOLEIL VEGAS, INC.

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

980 KELLY JOHNSON DRIVE
LAS VEGAS, NV 89119 US

New Principal Place of Business:

Current Mailing Address:

980 KELLY JOHNSON DR
LAS VEGAS, NV 89119 US

New Mailing Address:

980 KELLY JOHNSON DRIVE
LAS VEGAS, NV 89119 US

FEI Number: 20-0477947

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 328012607 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: D () Delete
Name: LALIBERTE, GUY
Address: 8400, 2ND AVENUE
City-St-Zip: MONTREAL (QUEBEC), CA H1Z4M6 CA

Title: PCEO () Delete
Name: LAMARRE, DANIEL
Address: 8400, 2ND AVENUE
City-St-Zip: MONTREAL (QUEBEC), CA H1Z4M6 CA

Title: VPS () Delete
Name: K MAYAT, RENE
Address: 8400, 2ND AVENUE
City-St-Zip: MONTREAL (QUEBEC), CA H1Z4M6 CA

Title: VCFO () Delete
Name: BLAIN, ROBERT
Address: 8400, 2ND AVENUE
City-St-Zip: MONTREAL (QUEBEC), CA H1Z4M6 CA

Title: AS () Delete
Name: BLAIN, ROBERT
Address: 8400, 2ND AVENUE
City-St-Zip: MONTREAL (QUEBEC), CA H1Z4M6 CA

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: RENE KHAYAT

VPS

04/29/2009

Electronic Signature of Signing Officer or Director

Date