2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2008
Secretary of State

DOCUMENT# F07000005859

Entity Name: FAIRMONT RAFFLES HOTELS INTERNATIONAL (U.S.) INC.

Current Principal Place of Business:

650 CALIFORNIA STREET
12TH FLOOR
SAN FRANCISCO, CA 94108

New Principal Place of Business:

Current Mailing Address:

100 WELLINGTON STREET WEST
SUITE 1600
TORONTO M5K 1B7 CANADA,

New Mailing Address:

100 WELLINGTON STREET WEST
SUITE 1600
TORONTO M5K 1B7 CANADA, ON CANADA

FEI Number: 83-0497387 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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:	PD	( ) Delete
Name:	CAHILL, CHRIS J	
Address:	100 WELLINGTON STREET WEST, SUITE 1600	
City-St-Zip:	TORONTO ONTATIO M5K 1B7 ONT,	
Title:	D	( ) Delete
Name:	CARNELLA, JOHN A	
Address:	100 WELLINGTON STREET WEST, SUITE 1600	
City-St-Zip:	TORONTO ONTATIO M5K 1B7 ONT,	
Title:	S	( ) Delete
Name:	MCMULLEN, PAULA A	
Address:	100 WELLINGTON STREET WEST, SUITE 1600	
City-St-Zip:	TORONTO ONTATIO M5K 1B7 ONT,	
Title:	T	( ) Delete
Name:	JACOBS, KEVIN J	
Address:	100 WELLINGTON STREET WEST, SUITE 1600	
City-St-Zip:	TORONTO ONTATIO M5K 1B7 ONT,	

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:	

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: PAULA A MCMULLAN S 04/14/2008

Electronic Signature of Signing Officer or Director — Date