2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED
May 14, 2009
Secretary of State

DOCUMENT# M08000003965

Entity Name: MGM INTERNATIONAL GROUP LLC

Current Principal Place of Business:

501 BRICKELL KEY DR, SUITE 501
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

501 BRICKELL KEY DR, SUITE 501
MIAMI, FL 33131

New Mailing Address:

FEI Number: 20-8055992 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MARTIN, ENRIQUE J
GREENBERG TRAURIG, P.A.
1221 BRICKELL AVENUE, SUITE 2200
MIAMI, FL 33131 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

MANAGING MEMBERS/MANAGERS:

Title:	MGR	( ) Delete
Name:	MONROY, MARCO G	
Address:	501 BRICKELL KEY DR, SUITE 501	
City-St-Zip:	MIAMI, FL 33131	
Title:	MGR	( ) Delete
Name:	IANNANIEDO, MARIA PIA	
Address:	501 BRICKELL KEY DR, SUITE 501	
City-St-Zip:	MIAMI, FL 33131	
Title:	MGR	( ) Delete
Name:	MACKLE, JOHN	
Address:	501 BRICKELL KEY DR, SUITE 501	
City-St-Zip:	MIAMI, FL 33131	
Title:	MGR	( ) Delete
Name:	WOODLEY, JOHN	
Address:	501 BRICKELL KEY DR, SUITE 501	
City-St-Zip:	MIAMI, FL 33131	
Title:	MGR	( ) Delete
Name:	KING, NANCY	
Address:	501 BRICKELL KEY DR, SUITE 501	
City-St-Zip:	MIAMI, FL 33131	
Title:	S	( ) Delete
Name:	WATTS, FERN S	
Address:	501 BRICKELL KEY DR, SUITE 501	
City-St-Zip:	MIAMI, FL 33131	

ADDITIONS/CHANGES:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	MGR	(X) Change ( ) Addition
Name:	IANNARIELLO, MARIA PIA	
Address:	501 BRICKELL KEY DR, SUITE 501	
City-St-Zip:	MIAMI, FL 33131	
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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOHN MACKLE MGR 05/14/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date