2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000101035

DIGILIO, MONICA

PLANTATION, FL 33324

1000 SOUTH PINE ISLAND ROAD, #800

Name:

Address:

City-St-Zip:

Entity Name: KERZNER INTERNATIONAL MARKETING, INC.

FILED Jan 27, 2009 Secretary of State

Current P	rincipal Plac	e of Business:	New Princ	New Principal Place of Business:			
1000 SOU SUITE 800	TH PINE ISLA	ND ROAD					
	ION, FL 3332	43907					
Current N	lailing Addre	ss:	New Maili	New Mailing Address:			
1000 SOUTH PINE ISLAND ROAD, #800 PLANTATION, FL 333243907			1000 SOUTH PINE ISLAND ROAD SUITE 800 PLANTATION, FL 333243907				
FEI Number	: 65-0880994	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desired (()	
Name and	Address of	Current Registered Agent:	Name and	Name and Address of New Registered Agent:			
1201 HAY: TALLAHA: The above	S STREET SSEE, FL 323	CE COMPANY 3012525 US submits this statement for the	e purpose of changing i	its registered o	ffice or registered agent, or	- both,	
SIGNATUI							
01014/1101		nic Signature of Registered A			 Date		
Election Car		ng Trust Fund Contribution ().					
OFFICER	S AND DIREC	CTORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	BIUMI, BONNI 1000 SOUTH I) Delete E PINE ISLAND ROAD, #800 RDALE, FL 33324	Title: Name: Address: City-St-Zip:	()	Change () Addition		
Title: Name: Address: City-St-Zip:	MURTHA, WIL	PINE ISLAND ROAD, #800	Title: Name: Address: City-St-Zip:	JONES, CATHE	INE ISLAND ROAD, #800		
Title: Name: Address: City-St-Zip:	DVP (LEVINE, RICH 730 5TH AVE, NEW YORK, N	5TH FLOOR	Title: Name: Address: City-St-Zip:	()	Change () Addition		
Title:	EVP () Delete	Title:	()	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.

Name:

Address:

City-St-Zip:

SIGNATURE: BONNIE BIUMI DIR 01/27/2009