

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 03, 2006 8:00 am
Secretary of State

04-03-2006 90352 050 ***150.00

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1. Entity Name
YAK COMMUNICATIONS (AMERICA), INC.



Principal Place of Business
**300 CONSILIUM PLACE, SUITE 500
TORONTO ONTARIO M1H3G2
CANADA, XX**

Mailing Address
**300 CONSILIUM PLACE, SUITE 500
TORONTO ONTARIO M1H3G2
CANADA, XX**

DO NOT WRITE IN THIS SPACE

4004255



03092006 No Chg-P CR2E034 (11/05)

4. FEI Number
98-0349282

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**OLLE, DENNIS J
2601 SOUTH BAYSHORE DRIVE
SUITE 1600
MIAMI, FL 33133**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of, registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	ZWEBNER, CHARLES
STREET ADDRESS	300 CONSILIUM PLACE SUITE 500
CITY - ST - ZIP	SCARBOROUGH, ONTARIO, m1h3g2
TITLE	S
NAME	NOBLE, MARGARET
STREET ADDRESS	300 CONSILIUM PLACE SUITE 500
CITY - ST - ZIP	SCARBOROUGH, ONTARIO, m1h3g2
TITLE	TD
NAME	ZWEBNER, CHARLES
STREET ADDRESS	300 CONSILIUM PLACE SUITE 500
CITY - ST - ZIP	SCARBOROUGH, ONTARIO, m1h3g2
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-2306

Date

647 722-7400

Daytime Phone #