

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000001436

FILED  
Feb 09, 2012  
Secretary of State

Entity Name: IBASIS, INC.

**Current Principal Place of Business:**

20 SECOND AVENUE  
BURLINGTON, MA 01803 US

**New Principal Place of Business:**

**Current Mailing Address:**

20 SECOND AVENUE  
BURLINGTON, MA 01803 US

**New Mailing Address:**

FEI Number: 04-3332534

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CT 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

**OFFICERS AND DIRECTORS:**

Title: CEO  
Name: OFFERHAUS, WILLEM  
Address: 20 SECOND AVENUE  
City-St-Zip: BURLINGTON, MA 01803

Title: DIR  
Name: OFFERHAUS, WILLEM  
Address: 20 SECOND AVENUE  
City-St-Zip: BURLINGTON, MA 01803

Title: S  
Name: SCHMIDT, ELLEN  
Address: 20 SECOND AVENUE  
City-St-Zip: BURLINGTON, MA 01803

Title: CFO  
Name: LYPPENS, ROELANT  
Address: 20 SECOND AVENUE  
City-St-Zip: BURLINGTON, MA 01803

Title: DIR  
Name: VAN VIANEN, JOHN  
Address: 20 SECOND AVENUE  
City-St-Zip: BURLINGTON, MA 01803

Title: DIR  
Name: FARWERCK, JOOST  
Address: 20 SECOND AVENUE  
City-St-Zip: BURLINGTON, MA 01803

I hereby 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 all other like empowered.

SIGNATURE: ELLEN SCHMIDT

SEC

02/09/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date