

2007 FOR PROFIT CORPORATION REINSTATEMENT

APPROVED
AND
FILED



07 NOV 21 PM 1:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

20 11-27-07



REINSTATEMENT 07

DOCUMENT # F05000001241					
1. Entity Name GC TELESERVICES CANADA CORP.					
Principal Place of Business 2600 KOYL AVENUE, SASKATOON SASKATCHEWAN, CANADA S7L 5X9, XX			Mailing Address 6330 GULFTON STE 303 HOUSTON, TX 77081 US		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 20-0399559	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
8. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324				7. Name and Address of New Registered Agent	
				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL Zip Code	
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 January 1, 2008, Fee will be \$300.00				In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	C	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	KATZ, JEROLD B		NAME	100112474821	
STREET ADDRESS	6330 GULFTON STREET		STREET ADDRESS	11/21/07--01011--005 **150.00	
CITY-ST-ZIP	HOUSTON, TX 77081		CITY-ST-ZIP		
TITLE	VC	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	KATZ, EVAN H		NAME		
STREET ADDRESS	6330 GULFTON STREET		STREET ADDRESS		
CITY-ST-ZIP	HOUSTON, TX 77081		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	KARDESCH, MATTHEW		NAME		
STREET ADDRESS	6330 GULFTON STREET		STREET ADDRESS		
CITY-ST-ZIP	HOUSTON, TX 77081		CITY-ST-ZIP		
TITLE	P	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	TAYLOR, FRANK A		NAME		
STREET ADDRESS	6330 GULFTON STREET		STREET ADDRESS		
CITY-ST-ZIP	HOUSTON, TX 77081		CITY-ST-ZIP		
TITLE	S	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	GROSSR, ROBERT M		NAME		
STREET ADDRESS	6330 GULFTON STREET		STREET ADDRESS		
CITY-ST-ZIP	HOUSTON, TX 77081		CITY-ST-ZIP		
TITLE	CFOS	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	KINS, JACK		NAME	VP Treasury	
STREET ADDRESS	6330 GULFTON		STREET ADDRESS	Linda Spellacy	
CITY-ST-ZIP	HOUSTON, TX 77081		CITY-ST-ZIP	6330 Gulfton	
			Houston, TX 77081		
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: 				10/29/07 713-777-4441	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Date Daytime Phone #	