

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000106757

1. Entity Name

YAK COMMUNICATIONS (USA), INC.

03-28-2001 90075 049 ***150.00
P98000106757

FILED

01 APR 17 AM 8:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business 55 TOWN CENTRE COURT 610 SCARBOROUGH, ONTARIO M1P 4X4 CA	Mailing Address 55 TOWN CENTRE COURT 610 SCARBOROUGH, ONTARIO M1P 4X4 CA
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State
Zip	Country

4. FEI Number 98-0203422	Applied For Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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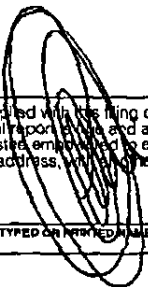
6. Name and Address of Current Registered Agent A Z REGISTERED AGENT CORPORATION 2601 SOUTH BAYSHORE DRIVE SUITE 1600 MIAMI FL 33133
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7. Name and Address of New Registered Agent Name DENNIS J. OLLE, ESQ. Street Address (P.O. Box Number is Not Acceptable) 2601 SOUTH BAYSHORE DRIVE SUITE 1600 City MIAMI FL Zip Code 33133
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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. SIGNATURE  DENNIS J. OLLE, ESQ. 3/26/01 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) ☐	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP ZWEBNER, CHARLES 121 WESTGATE BLVD TORONTO ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS GROPPER, BERNARD 224 MERTON ST STE 300 TORONTO ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GENOVA, VINCE 55 TOWN CENTRE STE 508 SCARBOROUGH ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, or other like empowered. SIGNATURE:  Charles Zwebner 3/26/01 (416) 296-7111 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
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CP2EC34 (10/00)