


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2005 8:00 am
Secretary of State

04-25-2005 90261 025 ***150.00


DOCUMENT # 845059
 1. Entity Name
MITEL NETWORKS, INC.



Principal Place of Business Mailing Address
 205 VAN BUREN ST. 205 VAN BUREN ST
 SUITE 400 SUITE 400
 HERNDON, VA 20170-5336 US HERNDON, VA 20170-5336 US

2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
 Zip Country Zip Country

20045871

 01032005 Chg-P CR2E034 (10/03)
 4. FEI Number Applied For
59-1855641 Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
PRENTICE-HALL CORPORATION SYSTEM, INC.
 1201 HAYS ST., SUITE 105
 TALLAHASSEE, FL 32301

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SILBERHORN, EDWARD 205 VAN BUREN ST- SUITE 400 HERNDON, VA 201705336	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CUESTA, GEORGE 2650 BIXHOF DRIVE SAN RAMON, CA 94583	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BUTCHER, PAUL 350 LEGGET DRIVE KANATA ONT, CANADA, k3k 2w7	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GRASSIE, STEVE 350 LEGGET DRIVE KANATA ONT, CANADA, k3k 2w7	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MCCARTHY, DOUGLAS 350 LEGGET DRIVE KANATA ONTARIO,CANADA K2K, 2W7	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S NA, CHRISTIAN 205 VAN BUREN ST,SUITE 400 HERNDON, VA 201705336	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Jerry Sparling 350 Legget Drive Kanata, Ontario, Canada K2K 2W7	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP John Uehling 3 Park Avenue, 31st Floor NY, NY 10016	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:   1-11-05 (203) 736-8124
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #