

MAY 2 8 2008

Missouri Public  
Service Commission

**STATE: MISSOURI**

**AGENCY: MISSOURI PUBLIC SERVICE  
COMMISSION**

**REPORT: PUC CLEC/IXC ANNUAL REPORT**

**IMPORTANT INSTRUCTIONS**

- 1- This form must be signed and notarized by an officer of your company.
- 2- Please submit this form to the below address:

Missouri Public Service Commission  
200 Madison Street  
Suite 100  
Jefferson City, MO 65101 (PO Box 360, 65101-0360)

The attached report is due on: 04/15/2008  
The attached report was prepared on: 04/08/2008  
The attached report was completed by: Alex Stewart/TCS  
If you have any questions regarding the attached report, please contact me directly.

Transcom Communications, Inc

[p] 678.718.1139  
[p] 888.603.3300  
[f] 770.956.0700

Thomson RIA / Tax Partners  
3100 Cumberland Boulevard • Suite 900 • Atlanta, GA 30339  
www.tcsteam.com

**FILED<sup>5</sup>**

MAY 2 8 2008

Missouri Public  
Service Commission

Transcom Communications, Inc

**Company Full Certificated Name** (Do not abbreviate and include any Commission approved  
AKA/DBA/Fictitious Name, if applicable.)

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**Parent Company Name** (if applicable; Do not abbreviate)

**COMPETITIVE LOCAL EXCHANGE CARRIER**

**and / or**

**INTEREXCHANGE TELECOMMUNICATIONS CARRIER**

**ANNUAL REPORT**

**TO THE**

**MISSOURI PUBLIC SERVICE COMMISSION**

**For the Calendar Year of**  
**January 1 - December 31, 2007**

Please choose one of the following filing options:



Public submission



Non-Public submission (Highly Confidential / Filed Under Seal)

**For this filing to be considered Highly Confidential,**  
**additional submission of materials is required pursuant**  
**to Commission rule 4 CSR 240-3.540, Section 392.210,**  
**RSMo., and/or Section 393.140, RSMo.**

## CLEC-IXC

## Annual Report of Transcom Communications, Inc

for the calendar year of January 1 - December 31, 2007

1. State in full the exact 'certificated' name of the Competitive Local Exchange Carrier (CLEC) and/or Interexchange Telecommunications Carrier (IXC):

(Do not abbreviate; yet include any Commission approved AKA/DBA/Fictitious Name, if applicable.)

Transcom Communications, Inc

State in full the parent company name of the Utility Company, if applicable (do not abbreviate):

Vyke AS

2. State in full the company's information below:

Martin Linges Vie 25

Company Street Address

(972)607-4761

Telephone Number

Martin Linges Vie 25

Company Mailing Address

(972) 929-2840

Fax Number

Snaroya Norway 1367

City

State

Zip

jeff.becker@us.maskina.com

\*E-Mail Address

3. Is the utility certificated as a Competitive Local Exchange Carrier? If yes, state effective date (contained in Commission Order approving) of certification by the MO Public Service Commission and associated case number (original certificate or merger/name change if name on tariff affected):

Date (e.g. 00/00/0000): 01/07/2003Case No.: XA-2003-0234

4. Is the utility certificated as a Interexchange Telecommunications Carrier? If yes, state effective date (contained in Commission Order approving) of certification by the MO Public Service Commission and associated case number (original certificate or merger/name change if name on tariff affected):

Date (e.g. 00/00/0000): 02/24/2003

Case No.: \_\_\_\_\_

5. Was the company certificated in Missouri under any other name(s)? If yes, please provide all names and time periods involved since the original certification:

6. This Competitive Local Exchange/Interexchange Telecommunications Carrier is a:

☒

Corporation

☐

Sole Proprietorship

☐

LP

Partnership

☐

LLC

☐

Other - Explain

(Check box with an X)

If different than certificated name listed above (e.g. parent corporation name) or if 'Other' is identified, explain:

7. State in full the name, street address, telephone number, and e-mail address\* of the company personnel or third-party preparer completing this Annual Report:

Alex Stewart/TCS

Name

770-956-7525 x1676

Telephone Number

3100 Cumberland Blvd.

Street Address

Suite 900770-956-0700

Fax Number

3100 Cumberland Blvd.

Mailing Address

Suite 900alexander.stewart@thomson.com

E-mail Address

Atlanta

City

GA

State

30339

Zip

\* Required if available. State n/a (not available) if no e-mail address is available.

## CLEC-IXC

Annual Report of Transcom Communications, Incfor the calendar year of January 1 - December 31, 2007

8. Under the laws of which state is the Competitive Local Exchange/Interexchange Telecommunications Carrier organized:

TX

9. Whether a corporation or not, give the particulars called for below concerning the principal or general officers of the Competitive Local Exchange/Interexchange Telecommunications Carrier at the end of the year. Please include an additional sheet, if enough space is not provided on this page, to completely provide the requested information.

[illegible]

10. Please provide a listing of all mergers, consolidations, and reorganizations, completed during the last year.

[illegible]

**CLEC-IXC**Annual Report of Transcom Communications, Incfor the calendar year of January 1 - December 31, 2007

11. Please provide the following information concerning Total Company and gross intrastate operating revenues (i.e., Missouri Jurisdictional) for this Calendar Year: 2007

**Revenues:**

	Total Company	MO Jurisdictional
Operating Revenues* from Telecommunication Services	\$26,801,749.13	\$17,006.90
Access Fee Revenues		
Federal USF Subsidies		
State USF Subsidies		
Other Revenues		

**TOTAL REVENUES**

<b>\$26,801,749.13</b>	<b>\$17,006.90</b>
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MO Jurisdictional should match Statement of Revenue  
\$17,006.90

Completion of both columns in this table  
is required.

**\* Missouri Revised Statutes §386.020(53)**

(53) "Telecommunications service", the transmission of information by wire, radio, optical cable, electronic impulses, or other similar means. As used in this definition, "information" means knowledge or intelligence represented by any form of writing, signs, signals, pictures, sounds, or any other symbols. Telecommunications service does not include:

(a) The rent, sale, lease, or exchange for other value received of customer premises equipment except for customer premises equipment owned by a telephone company certificated or otherwise authorized to provide telephone service prior to September 28, 1987, and provided under tariff or in inventory on January 1, 1983, which must be detariffed no later than December 31, 1987, and thereafter the provision of which shall not be a telecommunications service, and except for customer premises equipment owned or provided by a telecommunications company and used for answering 911 or emergency calls;

(b) Answering services and paging services;

(c) The offering of radio communication services and facilities when such services and facilities are provided under a license granted by the Federal Communications Commission under the commercial mobile radio services rules and regulations;

(d) Services provided by a hospital, hotel, motel, or other similar business whose principal service is the provision of temporary lodging through the owning or operating of message switching or billing equipment solely for the purpose of providing at a charge telecommunications services to its temporary patients or guests;

(e) Services provided by a private telecommunications system;

(f) Cable television service;

(g) The installation and maintenance of inside wire within a customer's premises;

(h) Electronic publishing services; or

(i) Services provided pursuant to a broadcast radio or television license issued by the Federal Communications Commission;

**12. Local Exchange Carriers Federal/State Low-Income/Disabled Universal Service Fund  
Subscribers**

**Background and Purpose:** To ascertain on a monthly basis the number of subscribers being provided federal and/or Missouri low-income/disabled support as being reported to USAC (federal support, Form 497) and the fund administrator of the Missouri programs (Missouri support).

**Calendar Year 2007**

<b>Month</b>	<b>Number of</b>	<b>Number of</b>
	<b>Missouri Low Income subscribers</b>	<b>Missouri Disabled subscribers</b>
January		
February		
March		
April		
May		
June		
July		
August		
September		
October		
November		
December		
<b>TOTAL:</b>		

CLEC Annual Report of Transcom Communications, Inc

for the calendar year of January 1 - December 31, 2007

### Exchange Access Lines Provided to RESIDENTIAL Customers

[illegible]

CLEC Annual Report of Transcom Communications, Inc

for the calendar year of January 1 - December 31, 2007

### Exchange Access Lines Provided to BUSINESS Customers

[illegible]



A registered official company representative is authorized to submit this Annual Report in the Missouri Public Service Commission's Electronic Filing and Information System (EFIS) once the form has been completed in its entirety and notarized. All seals must be present, if applicable. After submitting the Annual Report through EFIS, you will receive a BMAR (confirmation) number. Indicate that BMAR number on the original and retain for your records (pursuant to Sections 432.200 through 432.295 RSMo).

CLEC-IXC Annual Report of Transcom Communications, Inc

for the calendar year of January 1 - December 31, 2007

### VERIFICATION

The foregoing report must be verified by the oath of the President, Treasurer, General Manager or Receiver of the company. The oath required may be taken before any person authorized to administer an oath (Notary Public) by the laws of the State in which the same is taken.

### OATH

State Of

TEXAS

County Of

DALLAS

ss:

CHRIS YEOH

makes oath and says that

Name of Affiant (Company Official/Representative)

s/he is

PRESIDENT

Official Title of the Affiant (Company Official/Representative)

of

MASKINA COMMUNICATIONS INC.

Exact Legal Title or Name of the Respondent (Certificated Company Name)

that s/he has examined the foregoing report; that to the best of his or her knowledge, information, and belief, all statements of fact contained in the said report are true and the said report is a correct statement of the business and affairs of the above-named respondent.

from

JAN 01

Month/Day

2007

Year

, to and including

DEC 31

Month/Day

2007

Year

[Signature]

Signature of Affiant (Company Official/Representative)

Subscribed and sworn to before me, a

Notary Public

in and for the

State and County above named, this

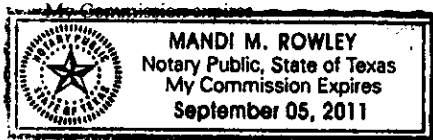
23<sup>rd</sup>

day of

May

2008

9/05/11



[Signature]

Signature of Notary Public

Missouri Revised Statutes § 392.210 or §393.140

If not utilizing EFIS, the original must be completed in its entirety, notarized (all applicable seals must be present) and mailed to:  
**Data Center**  
Missouri Public Service Commission  
200 Madison Street, Suite 100  
Jefferson City, MO 65101 (P.O. Box 360, 65102-0360)

**Maskine Communications, Inc.**  
8445 Freeport Parkway  
Suite 650  
Irving, TX 75063



MISSOURI PUBLIC SERVICE COMMISSION.  
200 MADISON STREET,  
SUITE 100  
JEFFERSON CITY MO 65101.