

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P16000002630

Entity Name: MAGICJACK SMB, INC.**Current Principal Place of Business:**1655 PALM BEACH LAKES BLVD.
SUITE 1012
WEST PALM BEACH, FL 33401**Current Mailing Address:**931 VILLAGE BLVD.
SUITE 905, BOX NO. 386
WEST PALM BEACH, FL 33409 US**FEI Number:** 81-1101638**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
C/O CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US*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

Officer/Director Detail :

Title PRESIDENT
Name VELUPPILLAI, ANANTH
Address 1655 PALM BEACH LAKES BLVD.
 SUITE 1012
City-State-Zip: WEST PALM BEACH FL 33401

Title VP
Name HELMS, THOMAS
Address 1655 PALM BEACH LAKES BLVD.
 SUITE 1012
City-State-Zip: WEST PALM BEACH FL 33401

Title DIRECTOR
Name RILEY, BRYANT R
Address 1655 PALM BEACH LAKES BLVD.
 SUITE 1012
City-State-Zip: WEST PALM BEACH FL 33401

Title DIRECTOR
Name AJM, PHILLIP J
Address 1655 PALM BEACH LAKES BLVD.
 SUITE 1012
City-State-Zip: WEST PALM BEACH FL 33401

Title CEO
Name YOUNG, KENNETH
Address 1655 PALM BEACH LAKES BLVD.
 SUITE 1012
City-State-Zip: WEST PALM BEACH FL 33401

Title SECRETARY
Name FORMAN, ALAN
Address 1655 PALM BEACH LAKES BLVD.
 SUITE 1012
City-State-Zip: WEST PALM BEACH FL 33401

Title DIRECTOR
Name KELLEHER, THOMAS J
Address 1655 PALM BEACH LAKES BLVD.
 SUITE 1012
City-State-Zip: WEST PALM BEACH FL 33401

Title CAO
Name WEITZMAN, HOWARD
Address 1655 PALM BEACH LAKES BLVD.
 SUITE 1012
City-State-Zip: WEST PALM BEACH FL 33401

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: ANANTH VELUPPILLAI**PRESIDENT****04/21/2021**

Electronic Signature of Signing Officer/Director Detail

Date