

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000005249

Entity Name: DIALOGIC INC.

Current Principal Place of Business:

4 GATEHALL DRIVE
PARSIPPANY, NJ 07054

Current Mailing Address:

4 GATEHALL DRIVE
PARSIPPANY, NJ 07054 US

FEI Number: 94-3409691

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
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, CEO, DIRECTOR
Name COOK, KEVIN
Address 4 GATEHALL DRIVE
City-State-Zip: PARSIPPANY NJ 07054

Title EVP, CFO
Name DENNERLEIN, BOB
Address 4 GATEHALL DRIVE
City-State-Zip: PARSIPPANY NJ 07054

Title EVP, SECRETARY, GC
Name HOUSEFATHER, ANTHONY
Address 4 GATEHALL DRIVE
City-State-Zip: PARSIPPANY NJ 07054

Title DIRECTOR
Name TREMBLAY, STEPHANIE
Address 4 GATEHALL DRIVE
City-State-Zip: PARSIPPANY NJ 07054

Title DIRECTOR
Name LAFLAMME, FRANCOIS
Address 4 GATEHALL DRIVE
City-State-Zip: PARSIPPANY NJ 07054

Title DIRECTOR
Name LEWIN, DAVID
Address 4 GATEHALL DRIVE
City-State-Zip: PARSIPPANY NJ 07054

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: ANTHONY HOUSEFATHER

EVP / SECRETARY

03/25/2015

Electronic Signature of Signing Officer/Director Detail

Date