

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F12000002703

Entity Name: MELLANOX TECHNOLOGIES, INC.**Current Principal Place of Business:**350 OAKMEAD PARKWAY, SUITE 100
SUNNYVALE, CA 94085**Current Mailing Address:**350 OAKMEAD PARKWAY, SUITE 100
SUNNYVALE, CA 94085**FEI Number:** 77-0506739**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T 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 C/P
Name WALDMAN, EYAL
Address 350 OAKMEAD PARKWAY, SUITE 100
City-State-Zip: SUNNYVALE CA 94085

Title D
Name SHULMAN, JACOB
Address 350 OAKMEAD PARKWAY, SUITE 100
City-State-Zip: SUNNYVALE CA 94085

Title TCFO
Name SHULMAN, JACOB
Address 350 OAKMEAD PARKWAY, SUITE 100
City-State-Zip: SUNNYVALE CA 94085

Title D
Name COHEN, SHAI
Address 350 OAKMEAD PARKWAY, SUITE 100
City-State-Zip: SUNNYVALE CA 94085

Title S
Name MENDELSON, ALAN
Address 140 SCOTT DRIVE
City-State-Zip: MENLO PARK CA 94025

Title DIRECTOR
Name WALDMAN, EYAL
Address 350 OAKMEAD PARKWAY, SUITE 100
City-State-Zip: SUNNYVALE CA 94085

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: JACOB SHULMAN

CFO

02/24/2015

Electronic Signature of Signing Officer/Director Detail

Date