

**2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F20000004733

**Entity Name:** JACKPOCKET INC.

**Current Principal Place of Business:**

100 PARK AVE, 16TH FLOOR  
NEW YORK, NY 10017

**Current Mailing Address:**

100 PARK AVE, 16TH FLOOR  
NEW YORK, NY 10017 US

**FEI Number:** 46-2663302

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LEGALINC CORPORATE SERVICES INC.  
476 RIVERSIDE AVE.  
JACKSONVILLE, FL 32202 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:** ANNA MANUKYAN

02/22/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT, CEO, DIRECTOR  
Name            SULLIVAN, PETER J  
Address        100 PARK AVE, 16TH FLOOR  
City-State-Zip: NEW YORK NY 10017

Title            SECRETARY  
Name            VANCE, CARTER  
Address        100 PARK AVE, 16TH FLOOR  
City-State-Zip: NEW YORK NY 10017

Title            CFO, TREASURER  
Name            SUIDA, SEAN  
Address        100 PARK AVE, 16TH FLOOR  
City-State-Zip: NEW YORK NY 10017

Title            DIRECTOR  
Name            ROTHSTEIN , ADAM  
Address        100 PARK AVE, 16TH FLOOR  
City-State-Zip: NEW YORK NY 10017

Title            DIRECTOR  
Name            EBINGER , JONATHAN  
Address        100 PARK AVE, 16TH FLOOR  
City-State-Zip: NEW YORK NY 10017

Title            DIRECTOR  
Name            LAI, CAREY  
Address        100 PARK AVE, 16TH FLOOR  
City-State-Zip: NEW YORK NY 10017

Title            DIRECTOR  
Name            MILLER , HARLEY  
Address        100 PARK AVE, 16TH FLOOR  
City-State-Zip: NEW YORK NY 10017

*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:** CARTER VANCE

SECRETARY

02/22/2024

Electronic Signature of Signing Officer/Director Detail

Date