

## Commonwealth of Kentucky Public Service Commission

### INFORMATION FORM FOR THE TELEPHONE UTILITIES OPERATING PURSUANT TO KRS 278.541 through 278.544

Complete Name of Telephone Utility: COMPAX MVNO Venture, Inc.

Physical Address of Principal Office: Street: 1915 NE Stucki Avenue, Suite 170  
City: Hillsboro State: OR 97006

Primary Contact: Name: Sabrina Soto Title: CEO  
Phone: (971) 387-6396 Fax: \_\_\_\_\_  
Email: sabrina.soto@compax.us

|                                                             |                                   |                     |        |            |
|-------------------------------------------------------------|-----------------------------------|---------------------|--------|------------|
| Person Responsible<br>For Answering<br>Consumer Complaints: | Name:                             | <u>Sabrina Soto</u> | Title: | <u>CEO</u> |
|                                                             | Address (if different from above) |                     |        |            |
|                                                             | Street:                           |                     | State: | Zip:       |
|                                                             | City:                             |                     | Fax:   |            |

In accordance with KRS 278.542(2), which requires telephone utilities operating pursuant to 2006 KRS 278.541 through KRS 278.544 to file with the Commission certain information, I, Sabrina Soto, CEO on behalf of COMPAX MVNO Venture, Inc. do hereby certify that the foregoing information is true and correct to the best of my knowledge, as of this 2nd day of October, 2025.

UTILITY: COMPAX MVNO Venture, Inc.

BY: Sabrina Soto

STATE OF Oregon  
COUNTY OF Washington

The foregoing was signed, sworn to and acknowledged before me, the NOTARY PUBLIC, on this the 2nd day of Oct., 2025.

  
NOTARY PUBLIC

My Commission Expires: 12/9/28

