

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000005869

Entity Name: IBM INDIA PRIVATE LIMITED, INC.

FILED
Feb 08, 2019
Secretary of State
5731306992CC

Current Principal Place of Business:

3039 CORNWALLIS ROAD
DEPT 1T8A, BLDG 062, D325
DURHAM, NC 27709

Current Mailing Address:

P.O. BOX 12195
DURHAM, NC 27709 US

FEI Number: 52-2061430

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 DIRECTOR
Name THYAGARAJAN, CHANDRASEKAR
Address FLAT # D1 406, WHITE HOUSE APARTMENTS 15TH CROSS 6TH MAIN RT
City-State-Zip: NAGAR BANGALORE

Title DIRECTOR
Name JOSHI, AVINASH
Address 401B SAVOY, RAHEJA GARDENS LBS MARG, THANE
City-State-Zip: MUMBAI 400604

Title MANAGING DIRECTOR
Name BAJWA, KARANJIT S
Address # 306, MAGNOLIAS, DLF GOLF LINKS, DLF PHASE 5
City-State-Zip: GURGAON HARYANA 122009

Title MANAGER OF OPERATIONS
Name BHAT, POLALI KRISHNA
Address 3039 CORNWALLIS ROAD DEPT 1T8A / BLDG 002 / HH226
City-State-Zip: DURHAM NC 27709

Title DIRECTOR
Name SREENIVAS, CHAITANYA
Address # 44 CUNNINGHAM APTS, 5 EDWARD RD
City-State-Zip: KARMATAKA BANGALRE 560002

Title DIRECTOR
Name SHARMA, AMIT
Address #209 3RD MAIN 5TH CROSS DEFENCE COLONY
City-State-Zip: INDIRANAGAR BANGALORE 560038

Title SECRETARY
Name SRIDHARAN, SUBHASHREE
Address T3, SRI MAHALAKSMI APTS 30/31 5TH MAIN 9TH CROSS
City-State-Zip: MALLESHWARAM 560003

Title TREASURER
Name NAYAK, NAGARAJ
Address SUBRAMANYA ARCADE #12 BANNERGHATTA RD
City-State-Zip: BANGALORE 560017

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: POLALI KRISHNA BHAT

MANGER OF OPERATIONS

02/08/2019

Electronic Signature of Signing Officer/Director Detail

Date