

**2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F99000005869

**Entity Name:** IBM INDIA PRIVATE LIMITED, INC.

**Current Principal Place of Business:**

3039 CORNWALLIS ROAD  
DEPT 1T8A, BLDG 002/02, HH221  
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 SANDIP, PATEL  
Address NO. 39 STANIFORD STREET  
City-State-Zip: AUBURNDALE MA 02466

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

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: KARNATAKA 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

Title DIRECTOR  
Name USHA, SRIKANTH  
Address NO. 523, 9TH MAIN, 4TH CROSS  
HAL 2ND STAGE  
City-State-Zip: BANGALORE OUT-OF-COUNTRY  
560008

*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

**MANAGER**

**04/23/2021**

Electronic Signature of Signing Officer/Director Detail

Date