2022 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:

MANAGER OF OPERATIONS

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:

Title

City-State-Zip:

Electronic Signature of Registered Agent

Date

FILED Apr 25, 2022

Secretary of State

6442060136CC

Officer/Director Detail:

Title **DIRECTOR** Title DIRECTOR

Name SANDIP, PATEL Name JOSHI, AVINASH

Address NO. 39 STANIFORD STREET Address 401B SAVOY, RAHEJA GARDENS

LBS MARG, THANE City-State-Zip: AUBURNDALE MA 02466

City-State-Zip: MUMBAI 400604

Title DIRECTOR Name BHAT, POLALI KRISHNA

Name SREENIVAS, CHAITANYA Address 3039 CORNWALLIS ROAD

Address # 44 CUNNINGHAM APTS, 5 EDWARD DEPT 1T8A / BLDG 002 / HH226

DURHAM NC 27709

City-State-Zip: KARMATAKA BANGALRE 560002

Title DIRECTOR Title SECRETARY

SHARMA, AMIT Name SRIDHARAN, SUBHASHREE Name

#209 3RD MAIN 5TH CROSS Address Address T3, SRI MAHALAKSMI APTS **DEFENCE COLONY**

30/31 5TH MAIN 9TH CROSS INDIRANAGAR BANGALORE 560038

City-State-Zip: MALLESHWARAM 560003 City-State-Zip:

Title **TREASURER** Title **DIRECTOR**

Name NAYAK, NAGARAJ Name USHA, SRIKANTH

Address SUBRAMANYA ARCADE #12

Address NO. 523, 9TH MAIN, 4TH CROSS BANNERGHATTA RD

HAL 2ND STAGE BANGALORE 560017

City-State-Zip: BANGALORE OUT-OF-COUNTRY City-State-Zip:

560008

OPERATIONS

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.

04/25/2022 SIGNATURE: POLALI KRISHNA BHAT MANAGER OF

Electronic Signature of Signing Officer/Director Detail

Date