2005 FOR PROFIT CORPORATION

ANNUAL REPORT DOCUMENT # F99000005869

IBM GLOBAL SERVICES INDIA PRIVATE LIMITED, INC.



FILED May 03, 2005 8:00 am Secretary of State

05-03-2005 90140 045 ***150.00

29000 HIGHWAY 98, SUMMIT BLDG. A, STE 204 DAPHNE, AL 36526 US \$ 2, Principal Piace of Business \$ 3, Mailing Address \$ 3. Mailing Address \$ 4. FEI Number \$ 52-2061430 \$ 10 PCR2E034 (10703) \$ 10 PCR2E034 (1070					WI TELL						
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Street Address (P.O. Box Number is Not Acceptable) City					Name						
City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when rentating): PILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ITILE MAME SIRRET ADDRESS CITY-S1-2IP BANGALORE, INDIA, TILE M. Delete TITLE AGGHUNANDAN, K.S. STREET ADDRESS CITY-S1-2IP Delete TITLE MAME BHAT, P.K. BIRET ADDRESS CITY-S1-2IP Delete TITLE MAME BHAT, P.K. SIRRET ADDRESS CITY-S1-2IP Delete TITLE MAME SIRRET ADDRESS CITY-S1-2IP Delete TITLE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 MAME SIRRET ADDRESS CITY-S1-2IP CITY-S1-2IP DELET ADDRESS CITY-S1-2IP CITY-S1-2IP DELET ADDRESS CITY-S1-2IP CITY-S1-2IP CITY	C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD				Street Address (P.O. Box Number is Not Acceptable)						
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, hyped or printed name of registered agent and tide if applicable. (NOTE: Registered Agent agnature required when reinstaling) DATE FILE NOW!!! FEE IS \$150.00	PLANTATIO	DN, FL 33324									
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information		rtify that the information supplied with	this filing does not qualify fo		ated in Se	ction 119.07(3)(i). I	Florida Statutes. I	further certi	fy that the in	nformation	

indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

P.KRISHAIH BHAT

2516211139

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR