

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 05, 2004 08:00 AM
Secretary of State

DOCUMENT # F99000005869

1. Entity Name

IBM GLOBAL SERVICES INDIA PRIVATE LIMITED, INC.



Principal Place of Business

29000 HIGHWAY 98, SUMMIT BLDG. A, STE 204
DAPHNE, AL 36526 US

Mailing Address

29000 HIGHWAY 98, SUMMIT BLDG. A, STE 204
DAPHNE, AL 36526 US



04292004 No Chg-P CR2E034 (10/03)

4. FEI Number

52-2061430

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

**DO NOT WRITE
IN THIS SPACE**

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

000000156370
05/05/04-80093-011 150.00

10. OFFICERS AND DIRECTORS

TITLE P
NAME THOMAS, ABRAHAM
STREET ADDRESS CUNNINGHAM ROAD
CITY - ST - ZIP BANGALORE, INDIA,

TITLE ST
NAME RAGHUNANDAN, K.S.
STREET ADDRESS SHAN KARANAGAR
CITY - ST - ZIP BANGALORE, INDIA,

TITLE M
NAME BHAT, P.K.
STREET ADDRESS 29000 HWY. 98, #204
CITY - ST - ZIP DAPHNE, AL 36526

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

06-28-04

Date

251-621-1139

Daytime Phone #