

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000005661

Entity Name: TCS E-SERVE AMERICA, INC.**Current Principal Place of Business:**4270 IVY POINTE BOULEVARD
SUITE 400
CINCINNATI, OH 45245**Current Mailing Address:**4270 IVY POINTE BOULEVARD
SUITE 400
CINCINNATI, OH 45245 US**FEI Number: NOT APPLICABLE****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	ONTEERU, MADHU
Address	4270 IVY POINTE BOULEVARD SUITE 400
City-State-Zip:	CINCINNATI OH 45245

Title	DIRECTOR
Name	SRINIVASAN, NARASIMHAN
Address	4270 IVY POINTE BOULEVARD SUITE 400
City-State-Zip:	CINCINNATI OH 45245

Title	SECRETARY
Name	SEWANI, LATESH MOHANDAS
Address	4270 IVY POINTE BOULEVARD SUITE 400
City-State-Zip:	CINCINNATI OH 45245

Title	TREASURER
Name	SEWANI, LATESH MOHANDAS
Address	4270 IVY POINTE BOULEVARD SUITE 400
City-State-Zip:	CINCINNATI OH 45245

Title	PRESIDENT
Name	SEWANI, LATESH MOHANDAS
Address	4270 IVY POINTE BOULEVARD SUITE 400
City-State-Zip:	CINCINNATI OH 45245

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: LATESH MOHANDAS SEWANI**SECRETARY****04/30/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date