

**2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F11000002195

**Entity Name:** HCL TECHNOLOGIES LIMITED CORPORATION

**Current Principal Place of Business:**

330 POTRERO AVE  
SUNNYVALE, CA 94085

**Current Mailing Address:**

330 POTRERO AVE  
SUNNYVALE, CA 94085 US

**FEI Number:** 98-0559509

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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           PRESIDENT  
Name           VIJAYAKUMAR, C.  
Address        330 POTRERO AVE  
City-State-Zip: SUNNYVALE CA 94085

Title           SECRETARY  
Name           ANAND, MANISH  
Address        330 POTRERO AVE  
City-State-Zip: SUNNYVALE CA 94085

Title           TREASURER  
Name           AGGARWAL, PRATEEK  
Address        330 POTRERO AVE  
City-State-Zip: SUNNYVALE CA 94085

Title           DIRECTOR  
Name           VIJAYAKUMAR, C.  
Address        330 POTRERO AVE  
City-State-Zip: SUNNYVALE CA 94085

Title           DIRECTOR  
Name           MALHOTRA, ROSHNI NADAR  
Address        330 POTRERO AVE  
City-State-Zip: SUNNYVALE CA 94085

Title           DIRECTOR  
Name           MALHOTRA, SHIKAR  
Address        330 POTRERO AVE  
City-State-Zip: SUNNYVALE CA 94085

Title           DIRECTOR  
Name           KAPOOR, DEEPAK  
Address        330 POTRERO AVE  
City-State-Zip: SUNNYVALE CA 94085

Title           DIRECTOR  
Name           MADHAVAN, S.  
Address        330 POTRERO AVE  
City-State-Zip: SUNNYVALE CA 94085

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*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:** C. VIJAYAKUMAR

**PRESIDENT**

**06/15/2022**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name CHELLAPPA, MOHAN  
Address 330 POTRERO AVE  
City-State-Zip: SUNNYVALE CA 94085

Title DIRECTOR  
Name ABRAMS, ROBIN  
Address 330 POTRERO AVE  
City-State-Zip: SUNNYVALE CA 94085

Title DIRECTOR  
Name ENGLAND, SIMON  
Address 330 POTRERO AVE  
City-State-Zip: SUNNYVALE CA 94085

Title DIRECTOR  
Name SIEBER, THOMAS  
Address 330 POTRERO AVE  
City-State-Zip: SUNNYVALE CA 94085

Title DIRECTOR  
Name VASUDEVA, NISHI  
Address 330 POTRERO AVE  
City-State-Zip: SUNNYVALE CA 94085

Title DIRECTOR  
Name SASTRY, S.  
Address 330 POTRERO AVE  
City-State-Zip: SUNNYVALE CA 94085

Title DIRECTOR  
Name SRINIASAN, R.  
Address 330 POTRERO AVE  
City-State-Zip: SUNNYVALE CA 94085

Title DIRECTOR  
Name NARAYANAN, VANITHA  
Address 330 POTRERO AVE  
City-State-Zip: SUNNYVALE CA 94085