## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F07000006299

Entity Name: TCS E-SERVE INTERNATIONAL LIMITED CORPORATION

FILED Apr 21, 2011 Secretary of State

Current Principal Place of Business: New Principal Place of Business	Current Principal Place of Business:	New Principal Place of Business
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TOWER A, 2ND FL., BUILDING NO. 6, W BLOCK

DLF PHASE III

GURGAON, MUMBAI, XX 122002 IN

Current Mailing Address: New Mailing Address:

TOWER A, 2ND FL., BUILDING NO. 6, W BLOCK DLF PHASE III

GURGAON, MUMBAI, XX 122002 IN

FEI Number: 98-0596173 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

## **OFFICERS AND DIRECTORS:**

Title: CEO

Name: KHOLKAR, DINANATH

Address: TOWER A, 2ND FL, BLDG #6, W BL DLF PHASE 3

City-St-Zip: GURGAON, MUMBAI, XX 122002 IN

Title: CFOD

Name: GUPTA, PRASHID

Address: TOWER A, 2ND FL, BLDG #6, W BL DLF PHASE 3

City-St-Zip: GURGAON, MUMBAI, XX 122002 IN

Title: S

Name: VIDYA, MAHADEVAN

Address: TOWER A, 2ND FL, BLDG #6, W BL DLF PHASE 3

City-St-Zip: GURGAON, MUMBAI, XX 122002 IN

Title: [

Name: DAMLE, SHIRISH K

Address: TOWER A, 2ND FL, BLDG #6, W BL DLF PHASE 3

City-St-Zip: GURGAON, MUMBAI, XX 122002 IN

Title:

Name: GROVER, BAWA

Address: TOWER A, 2ND FL, BLDG #6, W BL DLF PHASE 3

City-St-Zip: GURGAON, MUMBAI, XX 122002 IN

Title: D

Name: VAID, RAJIV

Address: TOWER A, 2ND FL, BLDG #6, W BL DLF PHASE 3

City-St-Zip: GURGAON, MUMBAI, XX 122002 IN

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: LAURA LOUIS POA 04/21/2011