

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000006299

FILED  
Apr 28, 2012  
Secretary of State

**Entity Name:** TCS E-SERVE INTERNATIONAL LIMITED CORPORATION

**Current Principal Place of Business:**

TOWER A, 2ND FL., BUILDING NO. 6, W BLOCK  
DLF PHASE III  
GURGAON, MUMBAI, XX 122002 IN

**New Principal Place of Business:**

**Current Mailing Address:**

TOWER A, 2ND FL., BUILDING NO. 6, W BLOCK  
DLF PHASE III  
GURGAON, MUMBAI, XX 122002 IN

**New Mailing Address:**

**FEI Number:** 98-0596173

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

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

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

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 CEO  
Address: BL NO. B3 NIRLON KNOWLEDGE PARK OFF WESTER  
City-St-Zip: GOREGAON (EAST), MUMBAI, XX 400063 IN

Title: DIR  
Name: GUPTA, PRASHID DIR  
Address: BL NO. B3 NIRLON KNOWLEDGE PARK OFF WESTER  
City-St-Zip: GOREGAON (EAST), MUMBAI, XX 400063 IN

Title: DIR  
Name: DAMLE, SHIRISH DIR  
Address: BL NO. B3 NIRLON KNOWLEDGE PARK OFF WESTER  
City-St-Zip: GOREGAON (EAST), MUMBAI, XX 400063 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

04/28/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date