

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F13000000003

Entity Name: ARICENT US, INC.**Current Principal Place of Business:**197 ROUTE 18 SOUTH
SUITE 3000
NEW BRUNSWICK, NJ 08816**Current Mailing Address:**197 ROUTE 18 SOUTH
SUITE 3000
NEW BRUNSWICK, NJ 08816 US**FEI Number:** 56-2587873**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	PRESIDENT
Name	SHASHANK, AMIT
Address	197 ROUTE 18 SOUTH SUITE 3000
City-State-Zip:	NEW BRUNSWICK NJ 08816

Title	VP
Name	MAINALI, BIPUL
Address	197 ROUTE 18 SOUTH SUITE 3000
City-State-Zip:	NEW BRUNSWICK NJ 08816

Title	DIRECTOR
Name	SHELMIRE, CAMIE
Address	197 ROUTE 18 SOUTH SUITE 3000
City-State-Zip:	NEW BRUNSWICK NJ 08816

Title	VP
Name	SHELMIRE, CAMIE
Address	197 ROUTE 18 SOUTH SUITE 3000
City-State-Zip:	NEW BRUNSWICK NJ 08816

Title	DIRECTOR
Name	SHASHANK, AMIT
Address	197 ROUTE 18 SOUTH SUITE 3000
City-State-Zip:	NEW BRUNSWICK NJ 08816

Title	TREASURER
Name	BANKUROVA, LARISA
Address	197 ROUTE 18 SOUTH SUITE 3000
City-State-Zip:	NEW BRUNSWICK NJ 08816

Title	AUTHORIZED SIGNATORY
Name	DUDLEY, SCOTT
Address	197 ROUTE 18 SOUTH SUITE 3000
City-State-Zip:	NEW BRUNSWICK NJ 08816

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: BIPUL MAINALI

VICE PRESIDENT

04/17/2017

Electronic Signature of Signing Officer/Director Detail_____
Date