

SCC eFile

2015 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION

215507136

1.) CORPORATION NAME:

**PENAR SOFTWARE CORP.**

DUE DATE: **1/31/2015**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**REGISTERED AGENTS INC.  
4445 CORPORATION LANE  
STE 264**

SCC ID NO: **04213898**

**VIRGINIA BEACH, VA**

5.) STOCK INFORMATION

| CLASS  | AUTHORIZED |
|--------|------------|
| COMMON | 1,000      |

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**VIRGINIA BEACH CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 4445 Corporation Lane  
Ste 264

CITY/ST/ZIP: Virginia Beach, VA 23462

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

|                 |                          |   |  |
|-----------------|--------------------------|---|--|
| NAME:           | NAREN CHAGANTI           | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE:          | PRES/SEC                 |   |  |
| ADDRESS:        | 713 THE HAMPTONS LANE    |   |  |
| CITY/ST/ZIP/CO: | TOWN & COUNTRY, MO 63017 |   |  |

|                 |                              |   |                                   |
|-----------------|------------------------------|---|-----------------------------------|
| NAME:           | RAO S CHAGANTI               | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE:          | VICE PRESIDENT               |   |                                   |
| ADDRESS:        | 16/485 III RAMAMOORTHY NAGAR |   |                                   |
| CITY/ST/ZIP/CO: | , , FN                       |   |                                   |

|                 |                      |   |                                   |
|-----------------|----------------------|---|-----------------------------------|
| NAME:           | DAVID ROSENFELD      | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE:          | VICE PRESIDENT       |   |                                   |
| ADDRESS:        | 203 YOAKUM PKWY #319 |   |                                   |
| CITY/ST/ZIP/CO: | ALEXANDRIA, VA 22304 |   |                                   |

|                 |                          |                                  |  |
|-----------------|--------------------------|----------------------------------|--|
| NAME:           | SURENDRA CHAGANTI        | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE:          | DIRECTOR                 |                                  |  |
| ADDRESS:        | 713 THE HAMPTONS LN      |                                  |  |
| CITY/ST/ZIP/CO: | TOWN & COUNTRY, MO 63017 |                                  |  |

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

|   |                                  |           |
|---|----------------------------------|-----------|
| /s/ NAREN CHAGANTI                                  | NAREN CHAGANTI, PRES/SEC         | 2/24/2015 |
| SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | PRINTED NAME AND CORPORATE TITLE | DATE      |

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.