

<b>SCC eFile</b>	<b>2015 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION</b>	215524442
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1.) CORPORATION NAME: <b>Techminds Solutions Inc.</b>	DUE DATE: <b>7/31/2015</b>				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>ANILKUMAR POTU 41711 DEER GRASS TER ALDIE, VA</b>	SCC ID NO: <b>07806474</b>				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>LOUDOUN COUNTY</b>	5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>25,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	25,000
CLASS	AUTHORIZED				
COMMON	25,000				
4.) STATE OR COUNTRY OF INCORPORATION: <b>VA</b>					

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 41711 Deer Grass Terrace

CITY/ST/ZIP: Aldie, VA 20105

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.

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: ANILKUMAR POTU		
TITLE: DIRECTOR		
ADDRESS: 41711 DEER GRASS TER		
CITY/ST/ZIP/CO: ALDIE, VA 20105		

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: VINODA THUMU		
TITLE: DIRECTOR		
ADDRESS: 41711 DEER GRASS TER		
CITY/ST/ZIP/CO: ALDIE, VA 20105		

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/ ANILKUMAR POTU	ANILKUMAR POTU, DIRECTOR	6/26/2015
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.