

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000005378

FILED  
May 04, 2005  
Secretary of State

Entity Name: HCL TECHNOLOGIES AMERICA INC.

**Current Principal Place of Business:**

330 POTRERO AVE.  
SUNNYVALE, CA 94085

**New Principal Place of Business:**

**Current Mailing Address:**

330 POTRERO AVE.  
SUNNYVALE, CA 94085

**New Mailing Address:**

FEI Number: 77-0205035      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

REGISTERED AGENTS LEGAL SERVICES, INC.  
1333 NORTH DUVAL STREET  
TALLAHASSEE, FL 32303      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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: NADAR, SHIV D  
Address: 330 POTRERO AVE  
City-St-Zip: SUNNYVALE, CA 94085

Title: D ( ) Delete  
Name: SIROHI, RAJ D  
Address: 330 POTRERO AVE  
City-St-Zip: SUNNYVALE, CA 94085

Title: P ( ) Delete  
Name: SHAMI, KHORANA P  
Address: 330 POTRERO AVE  
City-St-Zip: SUNNYVALE, CA 94085

Title: T ( ) Delete  
Name: MURUGESAN, MARIAPPAN T  
Address: 330 POTRERO AVE  
City-St-Zip: SUNNYVALE, CA 94085

Title: S ( ) Delete  
Name: RAGHU, LAKSHMAN R S  
Address: 330 POTRERO AVE  
City-St-Zip: SUNNYVALE, CA 94085

Title: D ( ) Delete  
Name: ANIL, CHANANA D  
Address: 330 POTRERO AVE  
City-St-Zip: SUNNYVALE, CA 94085

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: RAGHU RAMAN LAKSHMANAN

S

05/04/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date