

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 27 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F94000005348 (7)
 1. Corporation Name
TATA INFORMATION SYSTEMS LIMITED, INC.



Principal Place of Business 29000 HWY 98 SUMMIT A STE 204 DAPHNE AL 36526 US	Mailing Address 29000 HWY 98 SUMMIT A STE 204 DAPHNE AL 36526 US
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
10/14/1994

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

4. FEI Number
63-1080756 Applied For Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent
**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND RD.
 PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	M <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARWAHA, RAVINDRA N	1.2 NAME	
STREET ADDRESS	GOLDEN ENCLAVE TISL TOWER	1.3 STREET ADDRESS	
CITY-ST-ZIP	BANGALORE, INDIA	1.4 CITY-ST-ZIP	
TITLE	S <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VISHWANATHA, V	2.2 NAME	
STREET ADDRESS	GOLDEN ENCLAVE TISL TOWER	2.3 STREET ADDRESS	
CITY-ST-ZIP	BANGALOR, INDIA	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RAO, BANGALORE MADH	3.2 NAME	
STREET ADDRESS	IBM TOWERS 80 ANSON ROAD	3.3 STREET ADDRESS	
CITY-ST-ZIP	SINGAPORE IN	3.4 CITY-ST-ZIP	
TITLE	C <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TATA, RATAN N	4.2 NAME	
STREET ADDRESS	LOWER CALABA ROAD	4.3 STREET ADDRESS	
CITY-ST-ZIP	BOMBAY, INDIA	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VYAS, DINESH	5.2 NAME	
STREET ADDRESS	82 MITTAL TOWERS 'A' WING	5.3 STREET ADDRESS	
CITY-ST-ZIP	NAIRMAN POINT, BOMBAY, INDIA	5.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PENDSE, D S	6.2 NAME	
STREET ADDRESS	FLAT 23/24	6.3 STREET ADDRESS	
CITY-ST-ZIP	BAMBAY, INDIA	6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE _____

CR2E034 (10/97)