

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

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

98 JUN -5 AM 9:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # F95000005394 (0)

1. Corporation Name

TATA SONS LIMITED, CO.

Principal Place of Business

**101 PARK AVE
NEW YORK NY 10178**

Mailing Address

**101 PARK AVE
NEW YORK NY 10178**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/03/1995

4. FEI Number

98-0031698

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

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

30

9. Name and Address of Current Registered Agent

**VADLAMANI, S.S.
TATA CONSULTANCY SERVICES
1803 S CONGRESS AVE #380
BOYNTON BCH FL 33426**

10. Name and Address of New Registered Agent

81 Name **KRITHI VASAN**

82 Street Address (P.O. Box Number is Not Acceptable)

SAME ADDRESS

83

84 City

FL

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 understand the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

K. Krithivasan

K. KRITHIVASAN

6/2/98

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **DC**
NAME **TATA, R.N.**
STREET ADDRESS **BOMBAY HOUSE, 24 HOMI MODY ST**
CITY-ST-ZIP **BOMBAY 400 001, INDIA**

☐ DELETE

TITLE **D**
NAME **PALKHIVALA, N.A.**
STREET ADDRESS **BOMBAY HOUSE, 24 HOMI MODY ST**
CITY-ST-ZIP **BOMBAY 400 001, INDIA**

☐ DELETE

TITLE **D**
NAME **SETH, D.S.**
STREET ADDRESS **BOMBAY HOUSE, 24 HOMI MODY ST**
CITY-ST-ZIP **BOMBAY 400 001, INDIA**

☐ DELETE

TITLE **D**
NAME **SHABHA, J.J.**
STREET ADDRESS **BOMBAY HOUSE, 24 HOMI MODY ST**
CITY-ST-ZIP **BOMBAY 400 001, INDIA**

☐ DELETE

TITLE **D**
NAME **MEHTA, F.A.**
STREET ADDRESS **BOMBAY HOUSE, 24 HOMI MODY ST**
CITY-ST-ZIP **BOMBAY 400 001, INDIA**

☐ DELETE

TITLE **D**
NAME **MISTRY, P.S.**
STREET ADDRESS **BOMBAY HOUSE, 24 HOMI MODY ST**
CITY-ST-ZIP **BOMBAY 400 001, INDIA**

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **D.**
1.2 NAME **F.C. KOHLI**
1.3 STREET ADDRESS **BOMBAY HOUSE, 24 HOMI MODY ST.**
1.4 CITY-ST-ZIP **BOMBAY, 400 001, INDIA**

☐ Change ☒ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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

CR2E034 (10/97)