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FILED
Jul 14 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998

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



DOCUMENT # F96000002302 (5)

1. Corporation Name

~~DUN & BRADSTREET SATYAM SOFTWARE PRIVATE LIMITED~~
~~ING~~ Cognizant Technology Solutions India Limited

Principal Place of Business

C/O COGNIZANT CORP.
200 NYALA FARMS ROAD
WESTPORT CT 06880

Mailing Address

C/O COGNIZANT CORP.
200 NYALA FARMS ROAD
WESTPORT CT 06880

2. Principal Place of Business

2a. Mailing Address

21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Country
24	Country	29	Zip
25	Country	30	Country

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/07/1996

4. FEI Number

98-0154972

Applied For
Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing

☐

\$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

10. Name and Address of New Registered Agent

81 Name

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

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 accept the obligations of, Florida Statutes.

SIGNATURE

Signature type and production of original required when filing (if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	1.1 TITLE	VP
NAME	NARAYANAN, N. LAKSHMI	1.2 NAME	
STREET ADDRESS	ELDAMS ROAD	1.3 STREET ADDRESS	226 Cathedral Rd.
CITY-ST-ZIP	TEYNAMPET, CHENNAI 600 018	1.4 CITY-ST-ZIP	Karunai Kudil, Chennai, India 086
TITLE	D	2.1 TITLE	D
NAME	SCHERB, JEFF	2.2 NAME	Boatti, Stephen J.
STREET ADDRESS	10465 STANYAN STREET	2.3 STREET ADDRESS	200 Nyala Farms Rd.
CITY-ST-ZIP	ALPHARETTA GA 60202	2.4 CITY-ST-ZIP	Westport, CT 06880
TITLE	D	3.1 TITLE	D
NAME	CHOPRA, CHETAN	3.2 NAME	Finkelstein, Jared T.
STREET ADDRESS	77 CHIMBAI RAOD	3.3 STREET ADDRESS	200 Nyala Farms Rd.
CITY-ST-ZIP	BANDRA (W), MUMBAI 400 040	3.4 CITY-ST-ZIP	Westport, CT 06880
TITLE	CD	4.1 TITLE	P
NAME	MAHADEVA, WIJEYARAJ A	4.2 NAME	
STREET ADDRESS	200 NYALA FARMS ROAD	4.3 STREET ADDRESS	1700 Broadway
CITY-ST-ZIP	WESTPORT CT 06880	4.4 CITY-ST-ZIP	New York, NY 10019
TITLE	D	5.1 TITLE	D
NAME	KOENIG, WALTER	5.2 NAME	Leslye G. Katz
STREET ADDRESS	GRIEF SWALDER STREET, 7, 63322	5.3 STREET ADDRESS	200 Nyala Farms Rd.
CITY-ST-ZIP	RODEMARK, GERMANY	5.4 CITY-ST-ZIP	Westport, CT 06880
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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

Condon, Gabor

203-222-4587

CR2E034 (10/97)