2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # F9600002302 Apr 27, 2000 8:00 am Secretary of State Entity Name COGNIZANT TECHNOLOGY SOLUTIONS INDIA LIMITED COR 04-27-2000 90100 029 ***150.00 Principal Place of Business Mailing Address 500 GENPOINTE CENTRE WEST C/O COGNIZANT CORP. 200 NYALA FARMS ROAD TEANECK NJ 07666 WESTPORT CT 06880-6267 3. Mailing Address 2. Principal Place of Business 500 Glenpointe Centre West Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 98-0154972 Not Applicable Teaneck, NJ Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 07666 U.S.A. 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD **PLANTATION FL 33324** Zip Code 8. 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Change ☐ Addition TITLE ☐ Delete TITLE COBURN, GORDON J NAME NAME STREET ADDRESS STREET ADDRESS **500 GLENPOINTE CENTRE W** CITY-ST-ZIP CITY-ST-ZIP TEANECK NJ 07666 ☐ Change ☐ Addition ☐ Delete TITLE TITLE CHANDRASEKARAN, R NAME STREET ADDRESS STREET ADDRESS 226 CATHEDRAL RD CITY-ST-ZIP CITY-ST-ZIP KARUNAI KUDIL, INDIA Addition_ . 🗔 Change TITLE — □ Delete KOENING, WALTER NAME STREET ADDRESS STREET ADDRESS **500 GLENPOINTE CENTRE W** CITY-ST-ZIP CITY-ST-ZIP TEANECK NJ 07666 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME MAHADEVA, WIJEYARAJ A NAME STREET ADDRESS STREET ADDRESS **500 GLENPOINTE CENTRE W** CITY-ST-ZIP CITY-ST-ZIP TEANECK NJ 07666 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NARAYANAN, LAKSHMI NAME NAME STREET ADDRESS STREET ADDRESS 226 CATHEDRAL RD CITY-ST-ZIP CITY-ST-ZIP KARUNAI KUDIL, INDIA ☐ Addition ☐ Change TITLE ☐ Delete TITLE

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-7IP

NAME STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/00

203-222-4587

Date

Daytime Phone #