2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 19, 2001 8:00 am
Secretary of State
04-19-2001 90333 049 ***150.00

DOCUMENT # F96000002302

1. Entity Name

COGNIZANT TECHNOLOGY SOLUTIONS INDIA LIMITED COR

Principal Place of Business	Mailing Address
500 GENPOINTE CENTRE WEST TEANECK NJ 07666 US	500 GENPOINTE CENTRE WEST TEANECK NJ 07666 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 98-0154972 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** 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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP COBURN, GORDON J 500 GLENPOINTE CENTRE W TEANECK NJ 07666	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President Chandra Sekaran R. 226 Cathedral Rd. Kurunai Kudil, India 600 086	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CHANDRASEKARAN, R 226 CATHEDRAL RD KARUNAI KUDIL, INDIA	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KOENING, WALTER 500 GLENPOINTE CENTRE W TEANECK NJ 07666	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Gordon J. Coburn 500 Glenpointe Centre West Teaneck, NJ 07666	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CD MAHADEVA, WIJEYARAJ A 500 GLENPOINTE CENTRE W TEANECK NJ 07666	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD NARAYANAN, LAKSHMI 226 CATHEDRAL RD KARUNAI KUDIL, INDIA	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (10/00)

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.

SIGNATURE: _____ Gordon J. Coburn 4/1/01 201-678-2726
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment
F96000002302
D00392520

IMS Health Incorporated

Certified 7099 3220 0010 4418 5926
200 Nyala Farms Road
Westport, CT 06880

Divisions of Corporarions
Uniform Business Report
P.O. Box 1500
Tallahassee, FL 32302-1500

April 15, 2001

RE: Cognizant Technology Solutions India Limited
I.D. NO. 98-0154972
REF.: 2001 Florida Uniform Business Report

Ladies and or/Gentlemen:

Enclosed herewith please find the following for the above-cited company:

☐ Income/Franchise Tax Return, Form No.: _____

☐ Estimated Tax Report, Form No.: _____

☐ Extension Request, Form No.: _____

☒ Other: Description: 2001 Florida Uniform Business Report

Form No.: _____

for the period January 1 - December 31 , 20 01

Also enclosed is our check number 281577 in the amount of $150.00 in satisfaction of the required amount due, if any.

Please acknowledge receipt of the enclosed by stamping the duplicate of this letter and return it in the stamped self-addressed envelope enclosed for your convenience.

Very truly yours,

Maryanne Piorek

Maryanne Piorek
Senior Manager - Tax Compliance

Enclosures
8000FLAN01.DOC