2002 UNIFORM BUSINESS REPORT (UBR)

Feb 03, 2002 8:00 am Secretary of State DOCUMENT # F96000002302 1. Entity Name 02-03-2002 90024 024 ***150.00 COGNIZANT TECHNOLOGY SOLUTIONS INDIA LIMITED COR **PORATION** Principal Place of Business Mailing Address 910027 500 GENPOINTE CENTRE WEST 500 GENPOINTE CENTRE WEST TEANECK NJ 07666 TEANECK NJ 07666 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FENNumber Applied For City & State City & State 98-0154972 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City FL 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. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. 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, 2002 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) FIFT TIME ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Company Change ☐ Addition ☐ Delete TITLE TITLE **VP** NAME NAME CHANDRA, SEKARAN R STREET ADDRESS STREET ADDRESS 226 CATHEDRAL RD CITY-ST-ZIP CITY-ST-ZIP KURUNAI KUDIL, INDIA 600- 086 ☐ Addition ☐ Delete TITLE TITLE NAME CHANDRASEKARAN, R STREET ADDRESS STREET ADDRESS 226 CATHEDRAL RD CITY-ST-7IP CITY-ST-ZIP Karunai Kudil, India Change ☐ Addition Delete TITI F TITLE NAME NAME COBURN, GORDON J STREET ADDRESS STREET ADDRESS 500 GLENPOINTE CENTRE W CITY-ST-ZIP CITY-ST-ZIP <u>Teaneck nj 07666</u> Change ☐ Addition ☐ Delete TITLE TITLE CD NAME NAME MAHADEVA, WIJEYARAJ A STREET ADDRESS STREET ADDRESS 500 GLENPOINTE CENTRE W CITY-ST-ZIP CITY-ST-ZIP TEANECK NJ 07666 ☐ Addition ☐ Delete TITLE Change TITLE NAME NAME NARAYANAN, LAKSHMI STREET ADDRESS STREET ADDRESS 226 CATHEDRAL RD CITY-ST-ZIP CITY-ST-ZIP <u>Karunai Kudil, India</u> ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

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 of 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

of the corporation or the receiver of trustee empowered to executanged, or on an attachment with an address with all others

SIGNATURE:

MOZOZOSEE). WILLIAMS 1-11-02 (25)

FILED