

2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000002302

Entity Name: COGNIZANT TECHNOLOGY SOLUTIONS INDIA LIMITED CORPORATION**FILED**
Apr 25, 2025
Secretary of State
3376616360CC**Current Principal Place of Business:**GROUND FLOOR, SDB 1, PLOT NO. H-4, SIPCOT IT PARK
PADUR POST, SIRUSERI
CHENGALPATTU DISTRICT, 603103**Current Mailing Address:**GROUND FLOOR, SDB 1, PLOT NO. H-4, SIPCOT IT PARK
PADUR POST, SIRUSERI
CHENGALPATTU DISTRICT, 603103 IN**FEI Number: 98-0154972****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US*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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	MANAGING DIRECTOR
Name	VARRIER, RAJESH
Address	GROUND FLOOR, SDB 1, PLOT NO. H-4, SIPCOT IT PARK PADUR POST, SIRUSERI
City-State-Zip:	CHENGALPATTU DISTRICT 603103

Title	DIRECTOR
Name	THIRUMALAI, NARAYANAN
Address	GROUND FLOOR, SDB 1, PLOT NO. H-4, SIPCOT IT PARK PADUR POST, SIRUSERI
City-State-Zip:	CHENGALPATTU DISTRICT 603103

Title	SECRETARY
Name	B, JANANEE
Address	GROUND FLOOR, SDB 1, PLOT NO. H-4, SIPCOT IT PARK PADUR POST, SIRUSERI
City-State-Zip:	CHENGALPATTU DISTRICT 603103

Title	CFO
Name	SINGHVI, MANISH
Address	GROUND FLOOR, SDB 1, PLOT NO. H-4, SIPCOT IT PARK PADUR POST, SIRUSERI
City-State-Zip:	CHENGALPATTU DISTRICT 603103

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JANANEE B**SECRETARY****04/25/2025**_____
Electronic Signature of Signing Officer/Director Detail_____
Date