

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000000172

FILED
Feb 04, 2008
Secretary of State

Entity Name: MSOURCE (INDIA) PRIVATE LIMITED, INC.

Current Principal Place of Business:

THE MILLENIA TOWER A&B, NO 1 & 2, MURPHY R
ALSOOR
BANGALORE, FC 500008

New Principal Place of Business:

Current Mailing Address:

4800 GREAT AMERICA PKWY., STE. 310
SANTA CLARA, CA 95054

New Mailing Address:

FEI Number: 98-0389081

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REGISTERED AGENTS LEGAL SERVICES, INC.
155 OFFICE PLAZA DR.
SUITE A
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JACOB, MANI
Address: THE MILLENNIA, TOWERS A&B, NOS 1&2, ULSOOR
City-St-Zip: BANGALORE 560 008 INDIA, FC 560008

Title: D () Delete
Name: SINAI, ROY
Address: THE MILLENNIA, TOWERS A&B, NOS 1&2, ULSOOR
City-St-Zip: BANGALORE 560 008 INDIA, FC 560 008

Title: D () Delete
Name: MILIND, GODBOLE
Address: 139/1, HOSUR RD, KORAMANGALA
City-St-Zip: BANGALORE 560095, INDIA, FC 560 095

Title: S () Delete
Name: SIVARAM, NAIR
Address: THE MILLENNIA, TOWERS A&B, NOS 1&2, ULSOOR
City-St-Zip: BANGALORE 560 008, INDIA, FC 560 008

Title: TC (X) Delete
Name: SUREKA, AMIT
Address: THE MILLENIA TOWER A&B, NO 1 & 2, MURPHY R
City-St-Zip: ULSOOR, FC 560008 IN

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: JACOB, MANI
Address: THE MILLENNIA, TOWERS A&B, NOS 1&2, ULSOOR
City-St-Zip: BANGALORE 560 008 INDIA, FC 560008

Title: D (X) Change () Addition
Name: ANANT, COPPER
Address: THE MILLENNIA, TOWERS A&B, NOS 1&2, ULSOOR
City-St-Zip: BANGALORE 560 008 INDIA, FC 560 008

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JACOB MANI

D

02/04/2008

Electronic Signature of Signing Officer or Director

Date