## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F04000004077

Entity Name: TATA CONSULTANCY SERVICES LIMITED INC.

FILED Aug 24, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:			
	AVENUE, 26TH K, NY 10178	FLOOR				
Current Mailing Address:			New Mailing Address:			
	AVENUE, 26TH K, NY 10178	FLOOR				
FEI Number:	98-0429806	FEI Number Applied For ( )	FEI Number Not Appl	Olicable ( ) Certificate of Status Desired ( )		
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:		
1200 SOUT PLANTATION	ORATION SYSTH PINE ISLANION, FL 33324	D ROAD US	urnoso of changing i	ita ragiotarad affica ar ragiotarad agant ar bath		
in the State		iomits this statement for the pr	urpose of changing i	its registered office or registered agent, or both,		
SIGNATUR	RE:					
	Electronic	Signature of Registered Age	nt	Date		
		2)(b), F.S., the corporation did not Trust Fund Contribution ( ).	receive the prior notic	ce.		
OFFICERS	AND DIRECT	ORS:	ADDITION	NS/CHANGES TO OFFICERS AND DIRECTOR	S:	
Title: Name: Address: City-St-Zip:	RAJADHYAKSHA	R INDIA BLDG., NARIMAN POINT	Title: Name: Address: City-St-Zip:	O (X) Change ( ) Addition HEGDE, SATYANARAYAN SR VP 101 PARK AVENUE, 26TH FLOOR NEW YORK, NY 10178 US		
Title: Name: Address: City-St-Zip:	P () E TATA, RATAN NA 163 LOWER COI MUMBAI, IN 400	_ABA ROAD	Title: Name: Address: City-St-Zip:	()Change()Addition		
Title: Name: Address: City-St-Zip:	CEO () E RAMADORAI, S 8 WORLI SEAFA MUMBAI,, IN 400		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	D () E MEHTA, AMAN 4/7 SHANTI NIKE NEW DELHI,, IN		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address:	MR (X) [ GANDHI, GANDH 379 THORNALI S		Title: Name: Address:	( ) Change ( ) Addition		

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.

City-St-Zip:

SIGNATURE: SATYANARAYAN S. HEGDE O 08/24/2009

City-St-Zip:

EDISON, NJ 08757