

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000006695

FILED
Mar 19, 2009
Secretary of State

Entity Name: INFOSYS BPO LIMITED INC.

Current Principal Place of Business:

6607 KAISER DRIVE
FREMONT, CA 94555

New Principal Place of Business:

Current Mailing Address:

6607 KAISER DRIVE
FREMONT, CA 94555

New Mailing Address:

FEI Number: 48-1260854

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: C (X) Delete
Name: PAI, TV MOHANDAS
Address: NO.521 THE EMBASSY ALI ASKER ROAD
City-St-Zip: BAGALORE, XX 560 001 XX

Title: DCEO () Delete
Name: CHAUDHRY, AMITABH
Address: NO.20, HOSUR ROAD
City-St-Zip: BANGALORE, XX 560034 XX

Title: D () Delete
Name: SHIBULAL, SD
Address: NO.383 42ND CROSS 9TH MAIN, 5TH BLOCK
City-St-Zip: JAYANAGER BANGALORE, XX 560 041 XX

Title: D () Delete
Name: VARMA, JAYANTH R
Address: INDIAN INSTITUTE OF MANAGEMENT
City-St-Zip: VASTRAPUR AHMEDABAD, XX 380 015 XX

Title: CFO () Delete
Name: MATHEWS, ABRAHAM
Address: PLOT NO. 26/3, 26/4 AND 26/6 ELECTRONICS C
City-St-Zip: BANGALORE, XX 56010 XX

Title: S () Delete
Name: RAVIKRISHAN, NR
Address: PLOT NO. 26/3, 26/4 AND 26/6 ELECTRONICS C
City-St-Zip: BANGALORE, XX 56010 XX

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: AMITABH CHAUDHRY

DCEO

03/19/2009

Electronic Signature of Signing Officer or Director

Date