## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F04000006695

Entity Name: INFOSYS BPO LIMITED INC.

FILED Apr 23, 2012 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6607 KAISER DRIVE FREMONT, CA 94555

Current Mailing Address: New Mailing Address:

6607 KAISER DRIVE FREMONT, CA 94555

FEI Number: 48-1260854 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New 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

## **OFFICERS AND DIRECTORS:**

Title: DCEO

Name: SWAMINATHAN, DANDAPANI Address: NO.20, HOSUR ROAD City-St-Zip: BANGALORE, XX 560034 XX

Title: [

Name: BALAKRISHAN, V

Address: NO 567 6TH MAIN RD. 3RD STAGE 3RD BLOCK

City-St-Zip: BANGALORE INDIA, XX 560079 XX

Title: D

Name: VARMA, JAYANTH R

Address: INDIAN INSTITUTE OF MANAGEMENT
City-St-Zip: VASTRAPUR AHMEDABAD, XX 380 015 XX

Title: CFO

Name: MATHEWS, ABRAHAM

Address: PLOT NO. 26/3, 26/4 AND 26/6 ELECTRONICS C

City-St-Zip: BANGALORE, XX 56010 XX

Title:

Name: RAVIKRISHAN, NR

Address: PLOT NO. 26/3, 26/4 AND 26/6 ELECTRONICS C

City-St-Zip: BANGALORE, XX 56010 XX

Title: D

Name: IYENGAR, SRIDAR
Address: NO 85 FAIR OAKS LANE
City-St-Zip: ATHERTON, CA 94027

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: NR RAVIKRISHNAN D 04/23/2012