2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000003422

Entity Name: IGATE GLOBAL SOLUTIONS LIMITED CORP.

FILED Mar 31, 2009 Secretary of State

Current Principal Place of Business:			New Princi	New Principal Place of Business:		
6525 KAISER DR. FREMONT, CA 94555						
Current Mailing Address:			New Mailir	New Mailing Address:		
6525 KAISER DR. FREMONT, CA 94555						
FEI Number: 2	25-1853647	FEI Number Applied For ()	El Number Not Appli	cable () Certificat	e of Status Desired ()	
Name and A	Address of Cu	rrent Registered Agent:	Name and	Address of New Regi	stered Agent:	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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 Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:						
Title: Name: Address: City-St-Zip:	MURTHY, PHANE	E, 1000 COMMERCE DR	Title: Name: Address: City-St-Zip:	PD (X) Change (MURTHY, PHANEESH 6528 KAISER DR FREMONT, CA 94555) Addition	
Title: Name: Address: City-St-Zip:	S () [MUKUND, SRINA EPIP PHASE II, V BANGALORE, X	VHITEFIELD	Title: Name: Address: City-St-Zip:	SECR (X) Change (MUKUND, SRINATH EPIP PHASE II, WHITEFIE BANGALORE, XX INDIA X	ELD	
Title: Name: Address: City-St-Zip:	WADHWANI, SUI	E, 1000 COMMERCE DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () [BALASUBRAMAN EPIP PHASE II, N INDIA, XX INDIA	VHITEFIELD	Title: Name: Address: City-St-Zip:	()Change() Addition	
Title: Name: Address: City-St-Zip:	D () [BASU, D. EPIP PHASE II, \ BANGALORE, XX		Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address: City-St-Zip:	YOURDON, ÈDW	E, 1000 COMMERCE DRIVE	Title: Name: Address: City-St-Zip:	() 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.

SIGNATURE: MUKUND SRINATH SECR 03/31/2009