2001 UNIFORM BUSINESS REPORT (UBR)

May 11, 2001 8:00 am Secretary of State DOCUMENT # F9600003494 1. Entity Name INTELLIGROUP, INC. 05-11-2001 90091 006 ***150.00 Mailing Address Principal Place of Business 499 THORNALL STREET 499 THORNALL STREET 11TH FLOOR 11TH FLOOR EDISON NJ 08837 EDISON NJ 08837 LIS 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 11-2880025 Not Applicable Zip Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent ... 6. Name and Address of Current Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City 8. 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Change ☐ Addition CEOD -Delete TITLE TITLE PANDEY, ASHOK NAME NAME STREET ADDRESS STREET ADDRESS **499 THORNALL ST** CITY-ST-ZIP CITY-ST-ZIP EDISON NJ 08837 ☐ Addition Change DIRECTOR TITLE CEOD Delete TITLE NAME Koneru, rajkumar NAME STREET ADDRESS 499 THORNALL ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP EDISON NJ 08837 CEO ICHAIRMAN OF THE BOARD Change · · · Addition ☐ Delete TITLE TITLE-VALLURIPALLI, NAGARJUN NAME NAME STREET ADDRESS STREET ADDRESS 499 THORNALL ST CITY-ST-7IP CITY-ST-ZIP EDISON NJ 08837 ☐ Addition ☐ Delete TITLE TITLE BESLER, KLAUS NAME NAME STREET ADDRESS 499 THORNALL ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP EDISON NJ 08837 ☐ Change ☐ Addition ☐ Delete TITLE TITI F VISCO, NICHOLAS NAME NAME STREET ADDRESS 499 THORNALL ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP EDISON NJ 08837 Addition DIRECTOR Change ☐ Delete TITLE TITLE DENNIS MCINTOSH NAME NAME LISTED OFFICERS DIRECTORS THORNALL ST STREET ADDRESS STREET ADDRESS N.J. 08837 CITY-ST-ZIP OF Dec. 31, 2000. EDISON,

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIREC

VICHOLAS VISCO-CFO 4