

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000003375

FILED
Apr 20, 2012
Secretary of State

Entity Name: CAPGEMINI AMERICA, INC.

Current Principal Place of Business:

623 FIFTH AVENUE
33RD FLOOR
NEW YORK, NY 10022

New Principal Place of Business:

Current Mailing Address:

400 BROADACRES DR.
SUITE 410
BLOOMFIELD, NJ 07003

New Mailing Address:

FEI Number: 22-2575929

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

OFFICERS AND DIRECTORS:

Title: C
Name: HERMELIN, PAUL CHR MN
Address: 623 FIFTH AVENUE 33RD FLOOR
City-St-Zip: NEW YORK, NY 10022 US

Title: D
Name: GIRAUD, HUBERT DR
Address: 11 RUE DE TILSITT, PLACE DE L'ETOILE
City-St-Zip: PARIS, FR 75017 FR

Title: AT
Name: COWELL, ROBERT J TAX OFF
Address: 400 BROADACRES DR STE 410
City-St-Zip: BLOOMFIELD, NJ 07003 US

Title: MGR
Name: COHEN, LANNY MGR
Address: 623 FIFTH AVENUE 33RD FLOOR
City-St-Zip: NEW YORK, NY 10022 US

Title: S
Name: CHAYET, MICHAEL SEC
Address: 623 FIFTH AVENUE 33RD FLOOR
City-St-Zip: NEW YORK, NY 10022 US

Title: T
Name: PLESSNER, RICHARD TREAS
Address: 400 BROADACRES DRIVE SUITE 410
City-St-Zip: BLOOMFIELD, NJ 07003 US

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: ROBERT COWELL

AT

04/20/2012

Electronic Signature of Signing Officer or Director

Date