2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 08:00 AM
Secretary of State

ANNUAL REPURT					Secretary of State			
DOCUMENT # P99000108637 1. Entity Name INFOSYS, INCORPORATED					2		y or some	
Principal Place 16431 SAPP WESTON, FL		Mailing Address 16431 SAPPHIRE PLACE WESTON, FL 33331			N 1811 HEN WELLEN) 21 21 21 21 21 21 21	ROZNI UTOT ADNITAT IL INVI	
C	OO NOT WRITE	CE	02052004 4. FEI Numb 65-097		CR2E034			
	6. Name and Address of Current Ro ALEX PPHIRE PLACE FL 33331			NOT W THIS SF				
	named entity submits this statement for tions of registered agent. Signature, typed or printed name of registered agent and	id Agent signalure required	d when reinstaling)	oth, in the State of Fl	orida I am fam	iillar with, and accept		
FILE NOW!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Selection Campaign Finan Trust Fund Contribution.			ncing \$5.	.00 May Be led to Fees				
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ALTMAN, ALEX 16431 SAPPHIRE PLACE WESTON, FL 33331	RECTORS			UC UUU 9] 11 3 794	114 FEEE - 117 P-1	3: 19 , 19	
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NAME SIREET ADDRESS CITY-ST-ZIP TITLE NAME SIREET ADDRESS								

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: / Cliffy

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/26/2004 (954)389-0298