

SCC eFile

**2014 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION**

214528077

1.) CORPORATION NAME:

INFOSYS BPO LIMITED

DUE DATE: **5/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY
Bank of America Center, 16th Floor
1111 East Main Street**

SCC ID NO: **F1629643**

RICHMOND, VA

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	123,375,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

FN

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 7707 Gateway Blvd
STE 110

CITY/ST/ZIP: Newark, CA 94560

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	GAUTAM THAKKAR	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	7707 Gateway Blvd, Ste 110		
CITY/ST/ZIP/CO:	Newark, CA 94560		

NAME:	PRAVEEN BHAT	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	US OFC		
ADDRESS:	6100 Tennyson Pkwy, Suite 200		
CITY/ST/ZIP/CO:	Plano, TX 75024		

NAME:	AGS MANIKANTHA	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	7707 Gateway Blvd, STE 110		
CITY/ST/ZIP/CO:	newark, CA 94560		

NAME:	ABRAHAM MATHEWS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CFO		
ADDRESS:	7707 Gateway Blvd, STE 110		
CITY/ST/ZIP/CO:	newark, CA 94560		

NAME:	S Gopalakrishnan	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIRMAN		
ADDRESS:	7707 Gateway Blvd, STE 110		
CITY/ST/ZIP/CO:	Newark, CA 94560		

NAME:	OMKAR GOSWAMI	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	7707 Gateway Blvd, STE 110		
CITY/ST/ZIP/CO:	Newark, CA 94560		

NAME: JAYANTH R VARMA TITLE: DIRECTOR ADDRESS: 6607 KAISER DRIVE CITY/ST/ZIP/CO: FREMONT, CA 94555	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: Prasad Thrikutam TITLE: DIRECTOR ADDRESS: 7707 Gateway Blvd, STE 110 CITY/ST/ZIP/CO: Newark, CA 94560	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ GAUTAM THAKKAR	GAUTAM THAKKAR, PRESIDENT	5/30/2014
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.