

| | | | | | |
|--|---|-------|------------|--------|---------|
| 1.) CORPORATION NAME: TATA CONSULTANCY SERVICES (PHILIPPINES), INC. | DUE DATE: 2/28/2014 | | | | |
| 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CT CORPORATION SYSTEM 4701 COX ROAD, SUITE 285 GLEN ALLEN, VA | SCC ID NO: F1919408 | | | | |
| 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY | 5.) STOCK INFORMATION <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">CLASS</td> <td style="width:50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>215,000</td> </tr> </table> | CLASS | AUTHORIZED | COMMON | 215,000 |
| CLASS | AUTHORIZED | | | | |
| COMMON | 215,000 | | | | |
| 4.) STATE OR COUNTRY OF INCORPORATION: FN | | | | | |

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 10TH FLOOR ACCRALAW TOWER SECOND AVE CORNER
30TH ST, E-SQUARE IT ZONE BONIFACIO GLOBAL CI

CITY/ST/ZIP: TGAUIG CITY, Philippines

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.

| | | |
|---|---|-----------------------------------|
| | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: ANIKUMAR MUKUNDBHAI SNEHI TITLE: PRESIDENT ADDRESS: TATA CONSULTANCY SERVICES (MALAYSIA) SDN. BHD CITY/ST/ZIP/CO: , , FN | | |

| | | |
|--|---|-----------------------------------|
| | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: VIKRAN SINGH TITLE: TREASURER ADDRESS: 10TH FLOOR ACCRALAW TOWER, 2ND AVENUE CORNER TGAUIG CITY ,1634,PHILIPPINES CITY/ST/ZIP/CO: , , FN | | |

| | | |
|---|---|-----------------------------------|
| | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: ROSA MICHELLE BAGTAS TITLE: SECRETARY ADDRESS: CVC LAW CENTER, 11TH AVE CORNER 39TH ST, CITY/ST/ZIP/CO: , , FN | | |

| | | |
|--|----------------------------------|--|
| | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: RAOUL ANGANGCO TITLE: DIRECTOR ADDRESS: CVCLAW CENTER, 11TH AVENUE CORNER 39TH STREET TAGUIG CITY ,1634,PHILIPPINES CITY/ST/ZIP/CO: , , FN | | |

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/ VIKRAN SINGH | VIKRAN SINGH, TREASURER | 4/6/2014 |
| 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.