

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000004010

FILED
Apr 25, 2012
Secretary of State

Entity Name: EXLSERVICE PHILIPPINES, INC.

Current Principal Place of Business:

6TH FLOOR ONE E-COM CENTER HARBOR DRIVE
MALL OF ASIA COMPLEX
PASAY CITY, PH 1308 PH

New Principal Place of Business:

6TH FLOOR, ONE E-COM CENTER
HARBOR DRIVE, MALL OF ASIA COMPLEX
PASAY CITY, PH 1308 PH

Current Mailing Address:

6TH FLOOR ONE E-COM CENTER HARBOR DRIVE
MALL OF ASIA COMPLEX
PASAY CITY, PH 1308 PH

New Mailing Address:

6TH FLOOR, ONE E-COM CENTER
HARBOR DRIVE, MALL OF ASIA COMPLEX
PASAY CITY, PH 1308 PH

FEI Number: 98-0580948

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: PD
Name: KAPOOR, ROHIT PD
Address: 6 FLR. 1 E-COM CTR. HARBOR DR. MOA COMPLEX
City-St-Zip: PASAY CITY, PH 1308 PH

Title: D
Name: TALWAR, VIKRAM D
Address: 6 FLR. 1 E-COM CTR. HARBOR DR. MOA COMPLEX
City-St-Zip: PASAY CITY, XX 1308 PH

Title: D
Name: VERGARA, MARK D
Address: 6 FLR. 1 E-COM CTR. HARBOR DR. MOA COMPLEX
City-St-Zip: PASAY CITY, PH 1308 PH

Title: SEC
Name: JUANITAS, RUBY SEC
Address: 6 FLR. 1 E-COM CTR. HARBOR DR. MOA COMPLEX
City-St-Zip: PASAY CITY, PH 1308 PH

Title: T
Name: MOYA, ANABELLA T
Address: 6 FLR. 1 E-COM CTR. HARBOR DR. MOA COMPLEX
City-St-Zip: PASAY CITY, PH 1308 PH

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: BRITNI WIGE

POA

04/25/2012

Electronic Signature of Signing Officer or Director

Date