



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

Filing Period: January 1 - March 1 • Filing Fee: \$50.00* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK
* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 153877		2. Name of Corporation Patri Americas, Inc.			
3. Street Address Principal Business Office One Broadway			City Cambridge	State MA	Zip 02142
4. Business Phone No. (617) 914-8000		5. State of Incorporation Massachusetts			
6. Brief Description of the Character of Business Conducted in Rhode Island Custom software programming and maintenance services.					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Narendra K. Patni			Vice President Name		
Street Address One Broadway			Street Address		
City Cambridge	State MA	Zip 02142	City	State	Zip
Secretary Name John D. Patterson, Jr.			Treasurer Name Narendra K. Patni		
Street Address c/o Foley Hoag LLP, 155 Seaport Blvd			Street Address One Broadway		
City Boston	State MA	Zip 02210	City Cambridge	State MA	Zip 02142
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Narendra K. Patni			Director Name Mrinal Sattawala		
Street Address One Broadway			Street Address One Broadway		
City Cambridge	State MA	Zip 02142	City Cambridge	State MA	Zip 02142
Director Name John G. Ganick			Director Name		
Street Address One Broadway			Street Address		
City Cambridge	State MA	Zip 02142	City	State	Zip
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
10,000	Common	No Par	9,350	Common	No Par
			THIS SECTION MUST BE COMPLETED		

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

File Date **FILED**
Check No. **SEP 23 2008**
By **50235 & 50374**
FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Narendra K Patni
Signature _____ Date _____
NARENDRA K PATNI
Print or Type Name
PRESIDENT
Title