



LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2005

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No. 114413		2. Exact name of the limited liability company Cappgemini U.S. LLC.			
3. State of Formation DELAWARE		4. Brief description of the character of the business which is actually conducted in Rhode Island INFORMATION TECHNOLOGY AND MANAGEMENT CONSULTING			
5. Principal office address 750 Seventh Avenue		City New York	State NY	Zip 10019	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name Eve Bolkin			Contact Title Assistant Secretary		
Street Address 750 Seventh Avenue, 17th Floor		City New York	State NY	Zip 10019	
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT, R.I.G.L. 7-16-12 (a) (2) / 7-16-52					
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11					
Agent Name CORPORATION SERVICE COMPANY			Address		
Address 222 JEFFERSON BOULEVARD, SUITE 200		City WARWICK	Zip 02888-		

This report must be signed in ink by an authorized person pursuant to R.I.G.L. 7-16-66.



114413

File Date	<u>10-31-05</u>
Check No.	<u>187305</u>
By:	<u>[Signature]</u>
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.

[Signature] 10/27/2005
Signature of Authorized Person
by: Cappgemini America, Inc., member
by: Eve Bolkin, Assistant Secretary
Print or Type Name of Authorized Person



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Matthew A. Brown, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401.222.3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2004

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No. 114413		2. Exact name of the limited liability company Capgemini U.S. LLC.	
3. State of Formation DELAWARE		4. Brief description of the character of the business which is actually conducted in Rhode Island INFORMATION TECHNOLOGY AND MANAGEMENT CONSULTING	
5. Principal office address 5 TIMES SQUARE		City NEW YORK	State NY
		Zip 10036-	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name EVE BOLKIN		Contact Title Assistant Secretary	
Street Address 750 SEVENTH AVE., 18TH FLOOR		City NEW YORK	State NY
		Zip 10019-	
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT. R.I.G.L 7-16-12 (a) (2) / 7-16-52			
Manager Name		Manager Name	
Street Address		Street Address	
City	State	Zip	City
Manager Name		Manager Name	
Street Address		Street Address	
City	State	Zip	City
8. RESIDENT AGENT IN RHODE ISLAND -DO NOT ALTER- Changes require filing of Form 642 - R.I.G.L. 7-16-11			
Agent Name CORPORATION SERVICE COMPANY		Address 222 JEFFERSON BOULEVARD, SUITE 200	
Address		City WARWICK	Zip 02888-

This report must be signed in ink by an authorized person pursuant to 7-16-66.



1 1 4 4 1 3

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.

Eve B. Bolkin 11/1/04
Signature of Authorized Person Date
by: Capgemini America, Inc., member
by: Eve B. Bolkin, Assistant Secretary
Print or Type Name of Authorized Person

114413 FLLC 10/20/04 10:49:25 AM

File Date 11/18/04

Check No. 175691

By: VS

FOR SECRETARY OF STATE USE ONLY



LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2003

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No. 114413		2. Exact name of the limited liability company Cap Gemini Ernst & Young U.S. LLC	
3. State of Formation DELAWARE		4. Brief description of the character of the business which is actually conducted in Rhode Island INFORMATION TECHNOLOGY AND MANAGEMENT CONSULTING	
5. Principal office address 5 Times Square		City New York	State NY
		Zip 10036	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name Eve Bolkin		Contact Title Assistant Secretary	
Street Address 750 Seventh Avenue, 18th Floor		City New York	State NY
		Zip 10019	
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT, R.I.G.L. 7-16-12 (a) (2) / 7-16-52			
Manager Name		Manager Name	
Street Address		Street Address	
City	State	City	State
Manager Name		Manager Name	
Street Address		Street Address	
City	State	City	State
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11			
Agent Name CORPORATION SERVICE COMPANY		Address	
Address 170 WESTMINSTER STREET, SUITE 900		City PROVIDENCE	Zip 02903-

This report must be signed in ink by an authorized person pursuant to R.I.G.L. 7-16-66.



* 1 1 4 4 1 3 *

File Date 10/6/03
Check No. 158111
By: [Signature]
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.

[Signature] 9/29/03
Signature of Authorized Person Date
by: Cap Gemini America, Inc., member
by: Eve Bolkin, Assistant Secretary
Print or Type Name of Authorized Person



LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2002

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No. 114413		2. Exact name of the limited liability company Cap Gemini Ernst & Young U.S. LLC	
3. State of Formation DELAWARE		4. Brief description of the character of the business which is actually conducted in Rhode Island Information technology and management consulting	
5. Principal office address 5 Times Square		City New York	State NY
		Zip 10036	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name Eve B. Bolkin		Contact Title Assistant Secretary	
Street Address 750 Seventh Avenue, 18th Floor		City New York	State NY
		Zip 10019	
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT. R.I.G.L. 7-16-12 (a) (2) / 7-16-52			
Manager Name		Manager Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
Manager Name		Manager Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
8. RESIDENT AGENT IN RHODE ISLAND -DO NOT ALTER- Changes require filing of Form 642 - R.I.G.L. 7-16-11			
Agent Name CORPORATION SERVICE COMPANY		Address	
Address 170 WESTMINSTER STREET, SUITE 900		City PROVIDENCE	Zip 02903-

This report must be signed in ink by an authorized person pursuant to 7-16-66.



* 1 1 4 4 1 3 *

FILED

File Date: DEC 03 2002

Check No. _____

By: cc 0152999

FOR SECRETARY OF STATE USE ONLY u

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.

20. 11 85 21 12 58 PM '02

DEC 3 12 57 PM '02

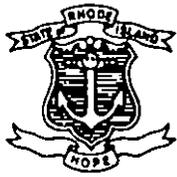
Signature of Authorized Person: Eve B. Bolkin Date: 9/10/2002

By: Cap Gemini America, Inc., Member
Eve B. Bolkin, Assistant Secretary

Print or Type Name of Authorized Person

Filing Fee: \$50.00

To be filed annually between
September 1 and November 1



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Corporations Division
100 North Main Street Providence, Rhode Island 02903-1335
Telephone (401) 222-3040

LIMITED LIABILITY COMPANY

ID Number FLLC 114413

Annual Report for the year 2001

1. The name of the limited liability company is:

Cap Gemini Ernst & Young U.S. LLC

2. The address of the principal office of the limited liability company is:

750 Seventh Avenue, New York, NY 10019

3. The state or other jurisdiction under the laws of which it is formed is DELAWARE

4. The name and address of its resident agent is: CORPORATION SERVICE COMPANY

170 WESTMINSTER STREET, SUITE 900 PROVIDENCE RI 02903-

5. The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are: c/o Eve Bolkin, Cap Gemini Ernst & Young U.S. LLC

1114 Ave. of the Americas, NY, NY 10036

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: information technology and management consulting

7. If the limited liability company has managers, the name and address of each manager of the limited liability company

See attachment 7

Dated Sept. 14, 2001

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.

Cap Gemini Ernst & Young U.S. LLC

Exact Name of Limited Liability Company

By

Eve B. Bolkin, Authorized Person

Title

Form No. 632
Revised 01/99



FILED
1 1 4 4 1 3

FOR SECRETARY OF STATE, USE ONLY	
File Date:	<u>9/18/2001</u>
Check No.:	<u>1126903</u>
By:	<u>[Signature]</u>

DETACH BOTTOM BEFORE RETURNING

Please detach and mail the above section including payment in the amount of \$50.00 made payable to Secretary of State. If the registered office and/or registered agent indicated below has changed, Form 642 must be filed in this office. Forms may be

**Attachment 7 to Cap Gemini Ernst & Young U.S. LLC
Rhode Island Annual Report for 2001**

Name	Address
Eric Geoffrey Unwin	130 Shaftesbury Ave., London 1V 8HH, England
Terrence R. Ozan	1200 Skylight Tower, 1660 West Second St., Cleveland, OH 44113
Robert McIlhattan	233 South Wacker Drive, Chicago, IL 60606