



**State of Rhode Island  
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Limited Liability Company  
Annual Report**

Filing Period: September 1 - November 1

*In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.*

**ANNUAL REPORT YEAR:** 2020

**1. ID No.** 000722809

**2. Exact Name of the Limited Liability Company** CAPGEMINI BUSINESS SERVICES USA LLC

**3. State of Formation**

State: DE

**ARTICLE III**

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

561440

**4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island**

BUSINESS PROCESS OUTSOURCING

**5. Principal Office Address**

No. and Street: 1359 LOMALAND DR., SUITE #110

City or Town: EL PASO

State: TX Zip: 79935 Country: USA

**6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:**

Contact Name: EVE B. BOLKIN Contact Title:

No. and Street: 79 FIFTH AVENUE, 3RD FLOOR

City or Town: NEW YORK

State: NY Zip: 10003 Country: USA

**7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.**

**DO NOT LIST MEMBERS**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
MANAGER	JOHN MULLEN	333W. WACKER DRIVE, SUITE 300 CHICAGO, IL 60606 USA
MANAGER	RICHARD PLESSNER	400 BROADACRES DR., SUITE 410

		BLOOMFIELD, NJ 07003 USA
MANAGER	JOHN GENTRY	LAS COLINAS TOWER 1, SUITE 700, 201 EAST JOHN, IRVING, TX 75062 USA

**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER  
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

CORPORATION SERVICE COMPANY 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI  
02888

**9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).**

**Signed this 21 Day of October, 2020 at 2:44:20 AM by the authorized person.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By JOHN GENTRY  
Signature of Authorized Person

Form No. 632  
Revised 09/07

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