FORM NO. DIR-12
[Pursuant to sections 7(1) (c), 168 & 170 (2) of The Companies Act, 2013 and rule 17 of the Companies (Incorporation) Rules 2014 and 8, 15 & 18 of the Companies (Appointment and Qualification of Directors) Rules, 2014]



Particulars of appointment of directors and the key managerial personnel

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			compan	. ,) ex	sisting co	mpa	Đ¥									
2	(a) * Corporate Identity	Ŋijſ	nber (G)	N) of			1,000	allinaria	TG20)18PT	G1274	121					
	(b)Global location numb	er (Ç	(LN) of g	омва	9¥	F0.5.2.3		رهو نعما = عي	() See Total		- 26,0 <u>.</u> 000	Section 1			 	Pre-f	ili 📑
3.	(a) Name of the compan	GV DISGOVERY CENTERS PRIVATE LIMITED															
(b) Address of the registered office of the company		5-4-187 M.G.R.C HYDER Hydera Telanga 500003)ad,s Abac 22d	ECU	AM MANI NDERAB	SIOI BAD.	V.2NE	FLO	OR,	and the same of th	The man is the						
	(c) E-mail ID of the comp	any	modite	al@h	otmai	l,eom			~ 3,27	Comments of the Comments of th			(VELTON)				
4.	Number of Managing dir	ecto	r or direg	tor(s)	for w	high the	forn	ı is be	ing fil	ed	Co-months.	T. K. J. A. J.		1			
5.	Details of the Managir	ng D	iregtor,	direc	tors	of the ge	amp	any]				

Details of the Managing Director or Director of the company
l Director Identification Number (DIN) 02903050 Pre-till
ii Name SHARAD KUMAR JAYANTILAL KADAKIA
JAYANTILAL KABAKIA
iv Present residential address 5-2-223 GOKUL DISTILLERY ROAD, OPP. ANDHRA BANK, HYDERBASTI, SEGUNDERABAD HYDERABAD Telangana India 500003
v Nationality US vi Rate of blith 25/08/1949 vii Gander Male
viii Appointment Cessation () Shange in designation
ix Designation Director x Dete of Appointment or shange in designation
xi Category Promoter (DD/MM/YYYY)
xii Whether Chairman, Executive Director, Non-Executive Director
Chairman Executive director Nga Executive Director
xiii DIN of such director to whom appointed is alternate
XiV Name of the director to whom such appointee is alternate
Name of the company or institution whose nominee the appointee is
xvi E-mail ID of director accounts@modiproperties.com
xvii In case of cessation
Hereby confirmed that the above mentioned 🔘 Pirector 🔘 Managing director axiii is not associated with the company
with effect from (DD/MM/YYYY) xlx due to
xx Interest in other entities
xxi Number of such entities
xxii *CIN/LLPIN/FCRN/Registration number Rre-fill
xxiii * Name
xxiv *Address
xxv Nature of interest xxvi * Designation
xxvii Percentage of Shareholding xxviii Amount
xxix Others (specify)
The state of the s

8	being filed	er(s), secretary(s), Chief Fingpgial Officer or Shief Executive Affice	Figs which the form is								
7.	. Details of manage	r(s), secretary(s), Chief Financial Officer or Shief Executive Officer	et the company								
ii Lii	Income Tax perma	•	Gre-fill Verify Details								
v	First Name	The second secon	The state of the s								
vi	Middle Name										
vii	Last Name	Jame L									
viii	Father's name										
ix	First Name										
x	Middle Name		Charge of the Control								
xi	Last Name										
iįx	Present residential	address xiii Line									
		xiv Line II									
χv	City										
xvi	State	KAN BID 6879									
xviii	ISO Country Code		the second secon								
χix	Country	The state of the s	Notice of the second								
xx	Phone	XXI Fax									
iixx	Date of birth	(BB/WW4xxx)									
xxiii	Designation										
xxiv	Date of Appointme	nt or cessation (BD/MM/YYYY)									
xxv	E-mail ID		A CONTRACTOR OF THE CONTRACTOR								
••			And the second s								

Attachments

List of attachments

(1) Declaration by first director
(2) Declaration of the appointee director in Form No. DIR-2;
(3) Notice of resignation;
(4) Evidence of cessation;
(6) Optional attachment(s) - if any. Reunove attachment
<u> </u>
SOHAM SATISH MODI
A person named in the articles as a gf the company
(in case if a new company) or
🗵 authorized by the Board of Directors of the Company vide 3
number dated 30/09/2019
to sign this form and declare that all the requirements of Campanies Act, 2013 and the rules made thereunder in respect of the subject matter of this form and matters incidental thereto have been compiled with. I also declare that all the information given herein above is true, correct and complete including the attachments to this form and nothing material has been suppressed.
* To be digitally signed by
* Designation Director
* Director identification number of the director; or BIN or PAN of the manager or CEO or CFO; or Membership number of the secretary
Certificate by practicing professional
I declare that I have been duly engaged for the purpose of sertification of this form. It is hereby certified that I have gone through the provisions of the Companies Act, 2013 and Rules thereunder for the subject matter of this form and matters incidental thereto and I have verified the above particulars (including attachment(s)) from the original/certified records maintained by the Company/applicant which is subject matter of this form and found them to be true, correct and complete and no information material to this form has been suppressed. I further certify that:
The said records have been properly prepared, signed by the required officers of the Company and maintained as per the relevant provisions of the Companies Act, 2013 and were found to be in order; All the required attachments have been completely and legibly attached to this form;
It is understood that I shall be liable for action under Section 448 of The Companies Act, 2013 for wrong certification, if any found at any stage.
* To be digitally signed by
Chartered accountant (in whole-time grastise) or Sest assountant (in whole-time gractice) or
Company secretary (in whole-time practice)
*Whether Associate or fellow O Associate O Fellow
Membership number
Certificate of Practice Number
Modify Check Form Rrescrutiny Submit

This eForm has been taken on file maintained by the Registrar of companies through electronic mode and on the basis of statement of correctness given by the filling company.

