MINISTRY OF CORPORATE AFFAIRS
RECEIPT
G.A.R.7

SRN: M27098706/ BharatKoshOrderId :1-377573245 **SRN Date:** 07/04/2022 11:32:46	**Service Request Date:** 11/07/2022

RECEIVED FROM:

Name: SHRUTI AGARWAL

Address : Hyderabad, , Amberpet, Amberpet, Telangana, 500013

ENTITY ON WHOSE BEHALF MONEY IS PAID

LLPIN/CIN: AAD-5224

Name: MODI FARM HOUSE (HYDERABAD) LLP

Address : 5-4-187/3&4, SOHAM MANSION M.G. ROAD, , SECUNDERABAD, Hyderabad, Telangana, 500003

FULL PARTICULARS OF REMITTANCE

Service Type: eFiling

Service Description	Type of Fee	Amount (Rs.)
Fee for LLP Form 11	Normal	50
	Additional	0
	Total	**50**

Mode of Payment: Internet Banking

Received Payment Rupees: Fifty Rupees Only.

Note: The defects or incompleteness in any respect in this application as noticed shall be placed on the Ministry's website(www.mca.gov.in). In case the application is marked as RSUB, please resubmit the application within the due date. Please track the status of your transaction at all times till it is finally disposed off. (please refer Rule 10 of the Companies (Registration offices and Fees) Rules, 2014)

LLP Form No. 11

Form language

(•) English ( ) Hindi

Annual Return of Limited Liability Partnership (LLP)
[Pursuant to rule 25(1) of Limited Liability Partnership Rules, 2009]

सत्यमेव जयते

Refer instruction kit for filing the form

*All fields marked in * are mandatory.*

LLP details

1 (a) *Financial year (From date) (DD/MM/YYYY)	01/04/2021
(b) *Financial year (To date) (DD/MM/YYYY)	31/03/2022
2 *Limited Liability Partnership identification number (LLPIN)	AAD-5224
3 (a) *Name of the Limited Liability Partnership (LLP)	MODI FARM HOUSE (HYDERABAD)
(b) *Address of the registered office of the LLP	5-4-187/3&4, SOHAM MANSION M.G. ROAD,SECUNDERABAD,Hyderabad,Telangana,500003,India
(c) *Jurisdiction of Police Station for the registered office	Ramgopalpet Police Station
(d) Other address if declared under section 13(2) for service of documents	
(e) Jurisdiction of Police Station for the other address	
(f) *e-mail ID	roc@modiproperties.com
4 *Business Classification *(Business/ Profession/Service/Occupation/Others)*	Business
5 *Principal business activities of the LLP	45
6 *Details as on 31st March of the period for which annual return is being filed	
(a) *Total number of designated partners	2
(b) *Total number of partners	0
(c) * Total obligation of contribution of partners of the LLP (in Rs.)	100000
(d) *Total contribution received from all the partners of the LLP (in Rs.)	100000

Individual Partner details

7. *Detail of individual(s) as partners

(a) *Designation	Designated Partner
(b) *Designated Partner Identification number (DPIN)/ Income tax permanent account Number (Income-tax PAN)/ Passport number	08026065
(c) *Name	PALLE BALRAM REDDY
(d) *Date of Appointment (DD/MM/YYYY)	01/04/2020
(e) Date of Cessation (DD/MM/YYYY)	
(f) Date of change in designation(DD/MM/YYYY)	
(g) Previous Designation	
(h) Previous Name, if any	
(i) *Obligation of contribution	10000
(j) Contribution received and accounted for	10000
(l) Number of limited liability partnership(s) in which he/she is a partner	6
(m) Number of company(s) in which he/she is a director	0
(k) Whether resident in India	(•) YES ( ) NO

(n) Details of company(s)/ LLP(s) in which partner/ designated partner is a director/ partner

(o)	(p)	(q)
S. no.	CIN/LLPIN	Name of Company/ LLP
1	AAE-8509	MEHTA & MODI REALTY (TIMMAPUR) LLP
2	AAZ-8183	MEHTA & REDDY FARMS LLP
3	AAE-3761	SERENE CLUBS & RESORTS LLP
4	AAE-3760	SERENE CONSTRUCTIONS LLP
5	AAD-5224	MODI FARM HOUSE (HYDERABAD) LLP
6	AAM-0691	MODI REALTY VIKARABAD LLP

Body Corporate details

(a) *Type of body corporate	Company
(b) *Corporate identity number (CIN) or Foreign company registration number (FCRN) or Limited liability partnership identification number (LLPIN) or Foreign Limited liability partnership identification number (FLLPIN) or any other identification number	U45200TG2002PTC040192
(c) *Name of the body corporate	MODI HOUSING PRIVATE LIMITED
(d) *Full address of the registered office or principal place of business in India	5-4-187/3&4, 3RD FLOOR,SOHAM MANSION, M.G.ROAD, SECUNDERABAD-3.
(e) *Country where registered	
(f) *Obligation of contribution	90000
(g) Contribution received and accounted for	90000
(h) Name and particulars of person signing on behalf of body corporate as nominee	
(i) *Name	SOHAM SATISH MODI
(j) *DPIN/ Income-tax PAN/ Passport number	00522546
(k) *Designation	Designated Partner
(l) *Date of Appointment(DD/MM/YYYY)	11/03/2015
(m) Date of Cessation (DD/MM/YYYY)	
(n) Date of change in designation (DD/MM/YYYY)	
(o) Previous Designation	
(p) Previous Name, if any	
(r) Number of limited liability partnership(s) in which he/she is a partner	21
(s) Number of company(s) in which he/she is a director	11
(q) Whether resident in India	(•) YES ( ) NO

(t) Details of company(s)/ LLP(s) in which partner/ designated partner is a director/ partner

8. Details of bodies corporate as partners

(u) S.no.	(v) CIN/LLPIN	(w) Name of Company/ LLP
1	AAY-3923	MODI REALTY LG MALAKPET LLP
2	AAJ-1117	MODI REALTY GENOME VALLEY LLP
3	AAF-7728	MODI REALTY (MIRYALAGUDA) LLP
4	AAZ-0502	VISTA VIEW LLP
5	AAM-0691	MODI REALTY VIKARABAD LLP
6	AAQ-4412	MATRIX REAL ESTATES CONSULTANTS LLP
7	AAX-9022	MODI REALTY CREATOPOLIS LLP

Summary of Partner/ Designated Partner

9 *Summary of designated partner/partner(s) as on 31st March of the period for which annual return is being filed

			Number of Designated Partners		
S. No.	Category	Number of partners	Resident in India	Others	Total
a	Individuals	0	1	0	1
b	LLPs	0	0	0	0
c	Companies	0	1	0	1
d	Foreign LLPs	0	0	0	0
e	Foreign companies	0	0	0	0
f	LLPs incorporated outside India	0	0	0	0
g	Companies incorporated outside India/ Companies registered in Sikkim	0	0	0	0
	Total	0	2	0	2

Penalty details

10 *Particulars of penalties imposed on the:

(i) *Limited liability partnership

(a) Number of rows required 0

(b)	(c)	(d)
Section Number	Offence	Penalty Imposed

(ii) *Partners / Designated partners

(a) Number of rows required 0

(f)	(g)	(h)	(i)	(j)	(k)
DPIN/ Income tax PAN/ passport number	Name of Partner / Designated Partner	Name of Nominee in case of body corporate	Section Number	Offence	Penalty Imposed

Compounding Offence details

11 *Particulars of compounding offences

(a) Number of rows required 0

(b)	(c)	(d)
Section Number	Offence	Date of compounding of offence (DD/MM/YYYY)

12 *Whether turnover of the LLP exceeds 5 crores ○ Yes ◉ No

Attachments

13 Optional attachment(s) - if any

Verification

* ☑ To the best of my knowledge and belief, the information given in this form and its attachment is correct and complete.

*To be digitally signed by

SOHAM SATISH MODI Digitally signed by SOHAM SATISH MODI Date: 2022.07.06 17:01:40 +05:30

Particulars of the person signing and submitting the form

*Name	Soham Satish Modi
*Designation (Designated Partner/Liquidator/ Interim Resolution Professional (IRP)/ Resolution Professional (RP)/LLP Administrator)	Designated Partner
* DPIN of the designated partner/ Income-tax PAN in case of Interim Resolution Professional (IRP)/Resolution Professional (RP)/Liquidator/LLP Administrator	00522546

Certificate

☑ I certify that Annual Return contains true and correct information.

To be digitally signed by Designated Partner

Palle Balaram Reddy — Digitally signed by Palle Balaram Reddy Date: 2022.07.06 17:00:16 +05'30'

DPIN of the designated partner	08026065

OR

☐ It is hereby certified that I have verified the above particulars (including attachment(s)) from the records of

MODI FARM HOUSE (HYDERABAD) LLP and found them to be true and correct. I further certify that all the required attachment(s) have been completely attached to this form.

Company Secretary in practice

Certificate of Practice number	
*Whether associate or fellow:	○ Associate ○ Fellow

Note: Attention is drawn to provisions of Section 448 and 449 which provide for punishment for false statement / certificate and punishment for false evidence respectively.

This Form 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 company

For office use only:

e-Form Service request number (SRN)

e-Form filing date (dd/mm/yyyy)