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

SRN:

M27062392/ BharatKoshOrderId :1-323202112

Service Request Date: 27/06/2022

SRN Date: 06/25/2022 12:58:47

RECEIVED FROM:

Name:

SHRUTI AGARWAL

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

ENTITY ON WHOSE BEHALF MONEY IS PAID

LLPIN/CIN:

AAP-1177

Name:

AEDIS DEVELOPERS LLP

Address: 5-4-187/3 & 4, 3rd Floor Soham Mansion, M.G. Road, , Secunderabad,

FULL PARTICULARS OF REMITTANCE

Service Type: eFiling

Service Description	Type of Fee	Amount (Rs.)
Fee for LLP Form 11		(1.5.)
	Normal	50
	Additional	0
	Total	
	Total	

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



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

Form language

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)	AAP-1177
3 (a) *Name of the Limited Liability Partnership (LLP)	AEDIS DEVELOPERS LLP
(b) *Address of the registered office of the LLP	5-4-187/3 & 4, 3rd Floor Soham Mansion, M.G.
(c) *Jurisdiction of Police Station for the registered office	Ramgopalpet Police Station
(d) Otheraddress 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 *Detailsas on 31st March of the period for which annual return is being filed	
(a) *Totalnumber of designated partners	2
(b) *Totalnumber 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 Partmer details

### 7. \*Detail of individual(s) as partners

(a) \*Designation

(h) *Dosignate - Dostana - Ll 195	
(b) *Designated Partner Identification number (DPIN)/ Income tax permanent account Number (Income-tax PAN)/ Passport number	07246636
(c) *Name	
(a) Harris	DHANRAJ KRISHNA PARVATHALA
(d) *Date of Appointment (DD/MM/YYYY)	20/04/2010
C / September (DD/WW/ 1111)	29/04/2019
(e) Date of Cessation (DD/MM/YYYY)	
	TO THE TANK
(f) Date of change in designation(DD/MM/YYYY)	
	]
(g) Previous Designation	

(h) Previous Name, if any

(i) \*Obligation of contribution

(j) Contribution received and accounted for

(I) Number of limited liability partnership(s) in which he/she is a partner

(m) Number of company(s) in which he/she is a director

(k) Whether resident in India

YES

50000

50000

1

2

Designated Partner

○ NO

## (n) Details $\mathbf{of}_{00}$ mpany(s)/ LLP(s) in which partner/ designated partner is a director/ partner

(o)	(p)	(q)
1	U72900TG2020PTC144942	GARAGEHUB PRIVATE LIMITED
2	U50103TG2015PTC100106	AUTOPARTS HUB PRIVATE LIMITED
3	AAP-1177	AEDIS DEVELOPERS LLP

Body Corporate details	
(a) *Type of body corporate	Company
(b) *Corporate identity number (CIN) or Foreign company registration number (or Limited liability partnership identification number (LLPIN) or Foreign Limited	FCRN)

liability partnership identification number (FLLPIN) or any other identification number

(c) \*Name of the body corporate

MODI PROPERTIES PRIVATE LIMITED

(d) \*Full address of the registered office or principal place of business in India

5-4-187/3&4, SOHAM MANSION, 2ND FLOOR, M.G. ROAD SECUNDERABAD

(e) \*Country where registered

(f) \*Obligation of contribution

50000

(g) Contribution received and accounted for

50000

(h) Name and particulars of person signing on behalf of body corporate as nominee

(i) \*Name

(j) \*DPIN/ Income-tax PAN/ Passport number

(k) \*Designation

00522546

(I) \*Date of Appointment(DD/MM/YYYY)

Designated Partner

SOHAM SATISH MODI

(m) Date of Cessation (DD/MM/YYYY)

29/04/2019

(n) Date of change in designation (DD/MM/YYYY)

(o) Previous Designation

(p) Previous Name, if any

(s) Number of company(s) in which he/she is a director

(r) Number of limited liability partnership(s) in which he/she is a partner

(q) Whether resident in India

YES

CNO

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

8. Details of bodies corporate as partners

(u)	(v)	(w)
S. no.	CIN/LLPIN	Name of Company/ LLP
20 10 10		
1	AAY-3923	MODI REALTY LG MALAKPET LLP
2	AAF-7728	MODI REALTY (MIRYALAGUDA) LLP
3	AAJ-1117	MODI REALTY GENOME VALLEY LLP
4	AAM-0691	MODI REALTY VIKARABAD LLP
5	AAZ-0502	· VISTA VIEW LLP
6	AAQ-4412	MATRIX REAL ESTATES CONSULTANTS LLP
7	AAV 0022	MODI DEALTV ODEATODOLIS LLD

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		2.5			runnis bonig
			Number of Design		
S. No.	Category	Number of partners	Resident in India	Others	Total
а	Individuals	0	1	0	1
b	LLPs	0	0	0	0
С	Companies	0	1	0	1
d	Foreign LLPs	0	0	0	0
е	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

Pena	ltv	d	et	ails
Ullia	,	u	~ E	

10 *Particulars of	penalties i	imposed	on the:
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(i) *Limited liability	v partnership
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, ·			_		
(a)	Num	Dern	Frows	reau	ired

0	
U	
1	

(c)	(d)	
Offence	Penalty Imposed	
		-

(b)	(0)				0.00		
(b)  DPIN/Income tax	(c)	(d)	(e)		(f)	(g)	
	Partner /	Name of Nominee in case					
	Designated	of body	Section Num	oer	Offence	Penalty Im	posed
	Partner	corporate					
		Corporate				-	
							Mid-William Control
		·					
ompounding Offence etails					9.5		
*Particulars of comp	ounding offend	ces					
) Number of rows requ	ıired				g		
,					0		
		25			10		
(b)	(c)		(d)				]
Section Number	Offer	nce	Dat (DD	e of co	ompoundin YYYY)	g of offence	
			,				-
							1
2 *\Whathar turnayar a	of the LLD evenes	la E grana					
	of the LLP exceed	ds 5 crores				€ No	
2 *Whether turnover of Attachments	of the LLP exceed	ds 5 crores	( Yes			€ No	
Attachments		ds 5 crores	C Yes	To proper to the contract of t		<b>(●</b> No	
		ds 5 crores	C Yes			€ No	
Attachments		ds 5 crores	C Yes			(€ No	
Attachments		ds 5 crores	C Yes			€ No	
Attachments		ds 5 crores	C Yes			€ No	
Attachments			C Yes			€ No	
Attachments						€ No	
Attachments  13 Optional attachme						€ No	
Attachments						(● No	
Attachments  13 Optional attachme						€ No	
Attachments  13 Optional attachments  erification	ent(s) - if any						
Attachments  13 Optional attachments  erification	ent(s) - if any			orm a			and complete.
Attachments  13 Optional attachments  erification	ent(s) - if any ny knowledge an			orm a		ment is correct	and complete.

0

(ii) \*Partners / Designated partners

(a) Number of rows required

Particulars of the person signing and submitting the form						
*Name	DHANRAJ KRISHNA PARVATHALA					
*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	07246636					
Certificate						
□ Certify that Annual Return contains true and correct information.						
To be digitally signed by Designated Partner	SOHAM Double spined by SATISH MODI ACT THE THE THE THE THE THE THE THE THE TH					
DPIN of the designated partner	00522546					
OR						
☐ It is hereby certified that I have verified the above particulars (including attachment)	s)) from the records of					
AEDIS DEVELOPERS LLP and found them to be true and correct. I fu	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						
*Whetherassociate or fellow: C Associate	← Fellow					
Note: Attention is drawn to provisions of Section 448 and 449 which provide for pu and punishment for false evidence respectively.	unishment for false statement / certificate					
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 company						

For office use only:	
e-Form Service request number (SRN)	
e-Form filing date (dd/mm/yyyy)	~