

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

**SRN:** M27122618/ BharatKoshOrderId :1-377734834  
**SRN Date:** 07/11/2022 11:34:49

**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:** AAC-6185  
**Name:** VILLA ORCHIDS 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
<b>Total</b>		<b>50</b>

**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

English  Hindi

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)	AAC-6185
3 (a) *Name of the Limited Liability Partnership (LLP)	VILLA ORCHIDS LLP
(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	anandmehta123@gmail.com
4 *Business Classification (Business/ Profession/Service/Occupation/Others)	Business
5 *Principal business activities of the LLP	70
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	1
(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

Partner

(b) \*Designated Partner Identification number (DPIN)/ Income tax permanent account Number (Income-tax PAN)/ Passport number

07921168

(c) \*Name

MEHTA HARI SURESH

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

03/06/2017

(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

25000

(j) Contribution received and accounted for

25000

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

5

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

1

(k) Whether resident in India

YES

NO

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

(o) S. no.	(p) CIN/LLPIN	(q) Name of Company/ LLP
1	U27109TG2002PTC039529	DILPREET TUBES PRIVATE LIMITED
2	AAU-9924	LAYA RECORDS LLP
3	AAR-4619	MEHTA GENOME VALLEY LIFE SCIENCES LLP
4	AAQ-6155	AAHANA PRODUCTIONS LLP
5	AAC-6185	VILLA ORCHIDS LLP
6	AAL-1319	MODI REALTY MALLAPUR LLP

Designated Partner

(a) \*Designation

(b) \*Designated Partner Identification number (DPIN)/ Income tax permanent account Number (Income-tax PAN)/ Passport number

01314936

(c) \*Name

ANAND SURESH MEHTA

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

22/08/2014

(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

25000

(j) Contribution received and accounted for

25000

(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

3

(k) Whether resident in India

YES

NO

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

(o) S. no.	(p) CIN/LLPIN	(q) Name of Company/ LLP
1	U70109MH2020PTC349934	TRED PROPTECH PRIVATE LIMITED
2	U74999TG2016PTC110038	MEHTA PROPPROPERTY ONLINE PRIVATE LIMITED
3	U27109TG2002PTC039529	DILPREET TUBES PRIVATE LIMITED
4	AAZ-8183	MEHTA & REDDY FARMS LLP
5	AAR-4619	MEHTA GENOME VALLEY LIFE SCIENCES LLP
6	AAN-2987	MEHTA & MODI REALTY KOWKUR LLP
7	AAN-2801	EAST SIDE RESIDENCY ANNOJIGUDA LLP
8	AAL-1319	MODI REALTY MALLAPUR LLP
9	AAC-6185	VILLA ORCHIDS 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

3RD FLOOR,SOHAMMANSSION, M.G.ROAD, SECUNDERABAD-3.

(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

SOHAM SATISH MODI

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

00522546

(k) \*Designation

Designated Partner

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

22/08/2014

(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	AAJ-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

(u)	(v)	(w)
5	AAM-0691	MODI REALTY VIKARABAD LLP
6	AAQ-4412	MATRIX REAL ESTATES CONSULTANTS LLP
7	AAX-9032	MODI REALTY CREATOPOLIS LLP
8	AAP-1177	AEDIS DEVELOPERS LLP
9	AAN-2987	MEHTA & MODI REALTY KOWKUR LLP
10	AAN-2801	EAST SIDE RESIDENCY ANNOJIGUDA LLP
11	AAN-1502	MODI CONSTRUCTIONS & REALTORS LLP
12	AAE-8509	MEHTA & MODI REALTY (TIMMAPUR) LLP
13	AAE-9129	MODI REALTY(SIDDIPET) LLP
14	AAE-3760	SERENE CONSTRUCTIONS LLP
15	AAE-3761	SERENE CLUBS & RESORTS LLP
16	AAD-5224	MODI FARM HOUSE (HYDERABAD) LLP
17	AAC-3606	SUMMIT SALES LLP
18	AAC-6185	VILLA ORCHIDS LLP
19	U45201TG2021PTC150174	GVRX FACILITIES MANAGEMENT PRIVATE LIMITED
20	U45100TG2004PTC044950	DR. N.R.K. BIO-TECH PRIVATE LIMITED
21	U24100TG2007PTC055759	CRESCENTIA LABS PRIVATE LIMITED
22	U70109TG2019PTC137599	GVSH MANUFACTURING FACILITIES PRIVATE LIMITED
23	U70100TG2020PTC138475	MODI & MODI REALTY HYDERABAD PRIVATE LIMITED
24	U73200TG2018PTC126666	GV RESEARCH CENTERS PRIVATE LIMITED
25	U73100TG2018PTC127421	GV DISCOVERY CENTERS PRIVATE LIMITED
26	U70101TG2010PTC067667	SDNMKJ REALTY PRIVATE LIMITED
27	U70100TG2010PTC067673	JMK GEC REALTORS PRIVATE LIMITED
28	U65993TG1994PTC017795	MODI PROPERTIES PRIVATE LIMITED
29	U45200TG2002PTC040192	MODI HOUSING PRIVATE LIMITED
30	AAW-6711	N SQUARE LIFESCIENCES LLP
31	AAL-1319	MODI REALTY MALLAPUR LLP
32	AAG-2108	SILVER OAK VILLAS 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

S. No.	Category	Number of partners	Number of Designated Partners		Total
			Resident in India	Others	
a	Individuals	1	1	0	2
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	1	2	0	3

Penalty details

10 \*Particulars of penalties imposed on the:

(i) \*Limited liability partnership

(a) Number of rows required

0

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

Anand Suresh Mehta  
Digitally signed by Anand Suresh Mehta  
DN: cn=Anand Suresh Mehta, o=, ou=, email=, c=IN  
11 06 21 +05 30



Particulars of the person signing and submitting the form

\*Name

\*Designation (Designated Partner/Liquidator/ Interim Resolution Professional (IRP)/ Resolution Professional (RP)/LLP Administrator)

\* DPIN of the designated partner/ Income-tax PAN in case of Interim Resolution Professional (IRP)/Resolution Professional (RP)/Liquidator/LLP Administrator

Certificate

I certify that Annual Return contains true and correct information.

To be digitally signed by Designated Partner

SOHAM  
SATISH  
MODI

Digitally signed by  
SOHAM SATISH  
MODI  
Date: 2022.07.11  
11:29:12 +05'30'

DPIN of the designated partner

OR

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