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

SRN: M27061880/ BharatKoshOrderId :1-317152377

SRN Date: 06/25/2022 12:26:03

Service Request Date: 25/06/2022

RECEIVED FROM:

Name: SHRUTI AGARWAL

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

ENTITY ON WHOSE BEHALF MONEY IS PAID

LLPIN/CIN: AAQ-4412

Name: MATRIX REAL ESTATES CONSULTANTS LLP

Address: 5/4/187/3 and 4, Soham Mansion, 2nd Floor, M.G.Road, Secunderabad,, , 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

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)	AAQ-4412
3 (a) *Name of the Limited Liability Partnership (LLP)	MATRIX REAL ESTATES CONSULTAN
(b) *Address of the registered office of the LLP	5/4/187/3 and 4, Soham Mansion, 2nd Floor, M.G.Road,
(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	shreya@matrixrecon.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	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

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

(c) *Name

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

(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

(j) Contribution received and accounted for

(l) 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 ○ NO

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

(o)	(p)	(q)

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	U65993TG1994PTC017795
(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	SOHAM SATISH MODI
(j) *DPIN/ Income-tax PAN/ Passport number	00522546
(k) *Designation	Designated Partner
(l) *Date of Appointment(DD/MM/YYYY)	02/09/2019
(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 oflimited liability partnership(s) in which he/she is a partner	21
(s) Number ofcompany(s) in which he/she is a director	11
(q) Whether resident in India	(•) YES ( ) NO

(t) Details ofcompany(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	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	AAX-9032	MODI REALTY CREATOPOLIS LLP

(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	U70102MH2007PTC168086
(c) *Name of the body corporate	MATRIX RECON PRIVATE LIMITED
(d) *Full address of the registered office or principal place of business in India	802, LODHA SUPREMUS SENAPATI BAPAT MARG MUMBAI Mumbai City Maharashtra
(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	SHREYA SAMIR MODY
(j) *DPIN/ Income-tax PAN/ Passport number	00221972
(k) *Designation	Designated Partner
(l) *Date of Appointment(DD/MM/YYYY)	02/09/2019
(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	2
(s) Number of company(s) in which he/she is a director	3
(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	U70109MH2022PTC383616	HOUZER PRIVATE LIMITED
2	AAQ-4412	MATRIX REAL ESTATES CONSULTANTS LLP
3	U70102MH2007PTC168086	MATRIX RECON PRIVATE LIMITED
4	U24100MH1989PTC051121	LAXMI DYESTUFFS PRIVATE LIMITED
5	AAJ-2642	MATRIX RFVENTURES 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	0	0	0
b	LLPs	0	0	0	0
c	Companies	0	2	0	2
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

(b) DPIN/ Income tax PAN/ passport number	(c) Name of Partner / Designated Partner	(d) Name of Nominee in case of body corporate	(e) Section Number	(f) Offence	(g) Penalty Imposed

Compounding Offence details

11 *Particulars of compounding offences

(a) Number of rows required 0

(b) Section Number	(c) Offence	(d) 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 Shreya Samir Mody

Particulars of the person signing and submitting the form

*Name	Shreya Samir Mody
*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	00221972

Certificate

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

SOHAM SATISH MODI Digitally signed by SOHAM SATISH MODI Date: 2022.06.25 13:52:16 +05:30

To be digitally signed by Designated Partner

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

MATRIX REAL ESTATES CONSULTANTS L 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)