

# MINISTRY OF CORPORATE AFFAIRS

RECEIPT

G.A.R.7

SRN : B96737820

Service Request Date : 21/02/2014

Payment made into : State Bank of India

Received From :

Name : SUMIT AGRAWAL  
Address : 6, GR FLOOR  
R. I. T. BUILDING  
COURT COMPOUND  
RANCHI, JHARKHAND  
834001

Entity on whose behalf money is paid

CIN : U45201JH2012PTC000150  
Name : NAMAN INFRA TECH PRIVATE LIMITED  
Address : 4-A, 4TH FLOOR, VINDHVASHNI COMPLEX,  
OPP. SIDHU KANHU PARK GATE ROAD, HATMA  
RANCHI, JHARKHAND  
INDIA - 834008

Full Particulars of Remittance

Service Type: eFiling

Service Description	Type of Fee	Amount(Rs.)
Fee For Form32	Normal	300.00
	<b>Total</b>	<b>300.00</b>

Mode of Payment: Internet Banking - State Bank of India

Received Payment Rupees: Three Hundred only

# FORM 32

Particulars of appointment of Managing Director, directors, manager and secretary and the changes among them or consent of candidate to act as a Managing Director or director or manager or secretary of a company and/ or undertaking to take and pay for qualification shares

[Pursuant to sections 303(2), 264(2) or 266(1)(a) and 266(1)(b)(iii) of the Companies Act, 1956]

Form Language  English  [HINDI]

Note - All fields marked in \*are to be mandatorily filled.

1. \*This form is for  New company  Existing company

2. (a) \*Form 1A reference number (Service request number (SRN) of Form 1A) or corporate identity number (CIN) of company

U45201JH2012PTC000150

(b) Global location number (GLN) of company

Pre-fill

3. (a) Name of the company

NAMAN INFRA TECH PRIVATE LIMITED

(b) Address of the registered office of the company

4-A, 4th Floor, Vindhvashni Complex,  
Opp. Sidhu Kanhu Park Gate Road, Hatma  
Ranchi  
Jharkhand  
INDIA  
834008

(c) e-mail ID of the company

joseph15061960@gmail.com

4. Number of Managing Director, director(s) for which the form is being filed

1

5. Details of the Managing Director, directors of the company

## I Details of the Managing Director or director of the company

Director identification number (DIN)

06563523

Pre-fill

Name

DINESH KUMAR

Father's name

BALESHWAR SINGH

Present residential address

SOUTH OFFICE PARA, DORANDA  
P.S DORANDA  
RANCHI  
Jharkhand  
India 834002

Nationality

IN

Date of birth

01/06/1987

Appointment  Cessation  Change in designation

Designation

Director

Date of appointment or change in designation

08/02/2014

Category

Promoter

(DD/MM/YYYY)

Whether chairman, executive director, non-executive director

Chairman  Executive director  Non-executive director

DIN of the director to whom the appointee is alternate

Pre-fill

Name of the director to whom the appointee is alternate

Name of the company or institution whose nominee the appointee is

e-mail ID of director

parijatkr@gmail.com

### In case of cessation

Hereby confirmed that the above mentioned  Director  Managing Director is not associated with the company with effect from  (DD/MM/YYYY) due to

6. Number of manager(s), secretary(s) for which the form is being filed

7. Details of the manager or secretary of the company

<b>Details of the manager or secretary of the company</b>	
Income-tax permanent account number (PAN)	<input type="text"/> <input type="radio"/> Appointment <input type="radio"/> Cessation
Whether the secretary is a member of ICSI	<input type="radio"/> Yes <input type="radio"/> No
Whether associate or fellow	<input type="radio"/> Associate <input type="radio"/> Fellow
Membership number of the secretary	<input type="text"/>
First name	<input type="text"/>
Middle name	<input type="text"/>
Last name	<input type="text"/>
<b>Father's name</b>	
First name	<input type="text"/>
Middle name	<input type="text"/>
Last name	<input type="text"/>
Present residential address	Line I <input type="text"/>
	Line II <input type="text"/>
City	<input type="text"/>
State	<input type="text"/>
	Pin code <input type="text"/>
ISO country code	<input type="text"/>
Country	<input type="text"/>
Phone	<input type="text"/> Fax <input type="text"/>
Date of birth	<input type="text"/> (DD/MM/YYYY)
Designation	<input type="text"/>
Date of appointment or cessation	<input type="text"/> (DD/MM/YYYY)
e-mail ID of manager or secretary	<input type="text"/>

8. Whether the form is being filed for Managing Director, director(s) who ceased to be associated with the company on or before 31st October, 2006 and do not have DIN (refer instruction kit for details)

Yes  No

**Verification I**

- 1. I confirm that the information given above is true to the best of my knowledge and belief.
- 2. It is hereby confirmed that the appointed director(s) whose particulars are given above, has given a declaration in writing to the company that he/ she is not restrained/ disqualified/ removed of, for being appointed as director of a company under the provisions of the Companies Act, 1956 including sections 203, 274 and 388E of the said Act.
- 3. It is also hereby confirmed that the consent of the appointee Managing Director, director(s) has been filed as an attachment to this eForm (applicable only in the case of a public company)
- 4. It is also confirmed that the appointed director(s) whose particulars are given above, has given a declaration to the company that he/ she has not been declared as proclaimed offender by any Economic Offence Court or Judicial Magistrate Court or High Court or any other Court.

**Attachments:**

- 1. Evidence of payment of stamp duty where qualification shares is involved (This will be mandatory only if the director giving consent agrees to pay for at least one share) Attach
- 2. Consent(s) of the appointee Managing Director, director(s) List of attachments Attach
- 3. Declaration regarding qualification shares Attach
- 4. Evidence of cessation Attach
- 5. Optional attachment(s) - if any Attach

Board Resolution.pdf

Remove Attachment

**Verification II**

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

- I have been authorised by the Board of directors' resolution number  dated  (DD/MM/YYYY) to sign and submit this form.
- I am authorised to sign and submit this form.

**To be digitally signed by**

Managing Director or director or manager or secretary of the company (In case of an existing company, person signing the form should be different from the person in whose respect the form is being filed)

MITHILE SH KUMAR

\* Designation

\* DIN of the director or Managing Director, or Income-tax PAN of the manager, or

Membership number, if applicable or income-tax PAN of the secretary (secretary of a company who is not a member of ICSI, may quote his/ her income-tax PAN)

**Certificate**

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 required attachment(s) have been completely attached to this form.

- Chartered accountant (in whole-time practice) or  Cost accountant (in whole-time practice) or  Company secretary (in whole-time practice)
- \* Whether associate or fellow  Associate  Fellow

RAJEEV ANAND

\* Membership number or certificate of practice number

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 filing company.

# MINISTRY OF CORPORATE AFFAIRS

RECEIPT

G.A.R.7

SRN: B96891056

Payment made into : State Bank of India

Service Request Date : 24/02/2014

Received From :

Name : SUMIT AGRAWAL  
Address : 6, GR FLOOR  
R. I. T. BUILDING  
COURT COMPOUND  
RANCHI, JHARKHAND  
834001

Entity on whose behalf money is paid

CIN : U45201JH2012PTC000150  
Name : NAMAN INFRATECH PRIVATE LIMITED  
Address : 4-A, 4TH FLOOR, VINDHVASHNI COMPLEX,  
OPP. SIDHU KANHU PARK GATE ROAD, HATMA  
RANCHI, JHARKHAND  
INDIA - 834008

Full Particulars of Remittance

Service Type: eFiling

Service Description	Type of Fee	Amount(Rs.)
Fee For Form32	Normal	300.00
	<b>Total</b>	<b>300.00</b>

Mode of Payment: Internet Banking - State Bank of India

Received Payment Rupees: Three Hundred only

# FORM 32

Particulars of appointment of Managing Director, directors, manager and secretary and the changes among them or consent of candidate to act as a Managing Director or director or manager or secretary of a company and/ or undertaking to take and pay for qualification shares

[Pursuant to sections 303(2), 264(2) or 266(1)(a) and 266(1)(b)(iii) of the Companies Act, 1956]

Form Language  English  [HINDI]

Note - All fields marked in \* are to be mandatorily filled.

1. \*This form is for  New company  Existing company

2. (a) \*Form 1A reference number (Service request number (SRN) of Form 1A) or corporate identity number (CIN) of company

U45201JH2012PTC000150

(b) Global location number (GLN) of company

Pre-fill

3. (a) Name of the company

NAMAN INFRA TECH PRIVATE LIMITED

(b) Address of the registered office of the company

4-A, 4th Floor, Vindhvashni Complex,  
Opp. Sidhu Kanhu Park Gate Road, Hatma  
Ranchi  
Jharkhand  
INDIA  
834008

(c) e-mail ID of the company

joseph15061960@gmail.com

4. Number of Managing Director, director(s) for which the form is being filed

2

5. Details of the Managing Director, directors of the company

## .1 Details of the Managing Director or director of the company

Director identification number (DIN)

05124133

Pre-fill

Name

CHANDRA SHEKHAR SINGH

Father's name

BALMUKUND SINGH

Present residential address

H/O SURENDRA PRASAD SINGH  
SHASTRI NAGAR ROAD NO 2 CHANDANI CHAUK KANKE ROAD  
RANCHI  
Jharkhand  
India 834008

Nationality

IN

Date of birth

05/05/1973

Appointment  Cessation  Change in designation

Designation

Director

Date of appointment or change in designation

(DD/MM/YYYY)

Category

Whether chairman, executive director, non-executive director

Chairman  Executive director  Non-executive director

DIN of the director to whom the appointee is alternate

Pre-fill

Name of the director to whom the appointee is alternate

Name of the company or institution whose nominee the appointee is

e-mail ID of director

joseph2@dataone.in

### In case of cessation

Hereby confirmed that the above mentioned  Director  Managing Director is not associated with the company

with effect from 12/02/2014

(DD/MM/YYYY) due to

Resignation

**II Details of the Managing Director or director of the company**

Director identification number (DIN)

05124159

Pre-fill

Name

UJJWAL SINGH RATHOUR

Father's name

BALMUKUND SINGH

Present residential address

FLAT NO 4A FLOOR VINDHYAVASINI  
OPP SIDHU KANHU PARK GATE RANCHI  
RANCHI  
Jharkhand  
India 834008

Nationality

IN

Date of birth

21/12/1982

Appointment  Cessation  Change in designation

Designation

Director

Date of appointment or  
change in designation

(DD/MM/YYYY)

Category

Whether chairman, executive director, non-executive director

Chairman  Executive director  Non-executive director

DIN of the director to whom the appointee is alternate

Pre-fill

Name of the director to whom the  
appointee is alternate

Name of the company or institution  
whose nominee the appointee is

e-mail ID of director

joseph2@dataone.in

**In case of cessation**

Hereby confirmed that the above mentioned  Director  Managing Director is not associated with the company

with effect from 12/02/2014

(DD/MM/YYYY) due to

Resignation

6. Number of manager(s), secretary(s) for which the form is being filed

7. Details of the manager or secretary of the company

Details of the manager or secretary of the company	
Income-tax permanent account number (PAN)	<input type="text"/>
Whether the secretary is a member of ICSI	<input type="radio"/> Appointment <input type="radio"/> Cessation
Whether associate or fellow	<input type="radio"/> Yes <input type="radio"/> No
	<input type="radio"/> Associate <input type="radio"/> Fellow
Membership number of the secretary	<input type="text"/>
First name	<input type="text"/>
Middle name	<input type="text"/>
Last name	<input type="text"/>
Father's name	
First name	<input type="text"/>
Middle name	<input type="text"/>
Last name	<input type="text"/>
Present residential address	Line I <input type="text"/>
	Line II <input type="text"/>
City	<input type="text"/>
State	<input type="text"/>
Pin code	<input type="text"/>
ISO country code	<input type="text"/>
Country	<input type="text"/>
Phone	<input type="text"/>
Fax	<input type="text"/>
Date of birth	<input type="text"/> (DD/MM/YYYY)
Designation	<input type="text"/>
Date of appointment or cessation	<input type="text"/> (DD/MM/YYYY)
e-mail ID of manager or secretary	<input type="text"/>

8. Whether the form is being filed for Managing Director, director(s) who ceased to be associated with the company on or before 31st October, 2006 and do not have DIN (refer instruction kit for details)

Yes  No

**Verification I**

- 1. I confirm that the information given above is true to the best of my knowledge and belief.
- 2. It is hereby confirmed that the appointed director(s) whose particulars are given above, has given a declaration in writing to the company that he/ she is not restrained/ disqualified/ removed of, for being appointed as director of a company under the provisions of the Companies Act, 1956 including sections 203, 274 and 388E of the said Act.
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**Attachments:**

- 1. Evidence of payment of stamp duty where qualification shares is involved (This will be mandatory only if the director giving consent agrees to pay for at least one share)
- 2. Consent(s) of the appointee Managing Director, director(s)
- 3. Declaration regarding qualification shares
- 4. Evidence of cessation
- 5. Optional attachment(s) - if any

List of attachments

Director's Resignation pdf  
Reg Resolution.pdf

**Verification II**

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

- I have been authorised by the Board of directors' resolution number 4 dated 12/02/2014 (DD/MM/YYYY) to sign and submit this form.
- I am authorised to sign and submit this form.

**To be digitally signed by**

Managing Director or director or manager or secretary of the company (In case of an existing company, person signing the form should be different from the person in whose respect the form is being filed)

- \* Designation
- \* DIN of the director or Managing Director; or
- Income-tax PAN of the manager; or
- Membership number, if applicable or income-tax PAN of the secretary (secretary of a company who is not a member of ICSI, may quote his/ her income-tax PAN)

MITHILE SHI KULMAI

RAJEEV ANAND

**Certificate**

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 required attachment(s) have been completely attached to this form.

- Chartered accountant (in whole-time practice) or  Cost accountant (in whole-time practice) or
- Company secretary (in whole-time practice)
- Whether associate or fellow  Associate  Fellow
- \* Membership number or certificate of practice number

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 filing company.