## SATTVA HOLDING AND TRADING PVT. LTD.

[Formerly known as Isis Holding and Trading Company Private Limited]

13th October, 2022

To **General Manager** DNBS MRO, Reserve Bank of India, Mumbai Regional Office, Byculla, Mumbai – 400008

Dear Sir / Ma'am,

## Ref: Sattva Holding and Trading Private Limited CIC Registration No. B-13.02355 Sub: Intimation with respect to re-appointment of Directors

This is to inform you that the shareholders at their 12<sup>th</sup> Annual General Meeting held on 29<sup>th</sup> September, 2022 re-appointed Mr. Viraf Rustom Mehta as the Independent Director of the Company pursuant to the provisions of Section 149, 150 and 152 of the Companies Act, 2013 for a period from 11<sup>th</sup> July, 2022 upto 10<sup>th</sup> July, 2027 and Mr. Bomi Pesi Chinoy as the Independent Director of the Company pursuant to the provisions of Section 149(9) of the Companies Act, 2013 from 1<sup>st</sup> October, 2022 upto 30<sup>th</sup> September, 2027.

A duly filed copy of eForm DIR-12 and Challan thereof is attached as 'Annexure 1' for your information and reference.

You are requested to take the same into your records and oblige.

Thanking you,

For Sattva Holding and Trading Private Limited

Percy Dajee CEO, CFO & Principal Officer

FORM NO. [Pursuant to sections 7(1) (c), 16 Companies Act, 2013 and rule 1 (Incorporation) Rules 2014 and 8 Companies (Appointment and Qu Directors) Rules, 2014]	8 & 170 (2) of The changes among them 7 of the Companies 8, 15 & 18 of the
Form Language	n 🔿 Hindi
Refer the instruction kit for fili	ng the form.
1. *This form is for O New	company 💿 existing company
2. (a) * Corporate Identity Nur	nber (CIN) of company U65923MH2011PTC214070
(b)Global location number (G	ILN) of company Pre-fill
3. (a) Name of the company	SATTVA HOLDING AND TRADING PRIVATE LIMITED
(b) Address of the registered office of the company	Unit No. 205, 2nd Floor, Welspun House, Kamala City, Lower Parel (West), Mumbai 400013 Mumbai Mumbai City Maharashtra 400013
(c) E-mail ID of the company	sattvaholding@gmail.com
4. Number of Managing directo	r or 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
ii Name     VIRAF RUSTOM MEHTA
iii Father's name RUSTOM HOSHUNG MEHTA
iv Present residential address K3/63, MERWANJI CAMA PARK, CAMA ROAD, ANDHERI WEST, OFF S V ROAD MUMBAI Maharashtra India 400058
v Nationality IN vi Date of birth 17/09/1954 vii Gender Male
viii Appointment Cessation Change in designation x Date of Appointment or 29/09/2022
ix Designation Director change in designation
xi Category Independent (DD/MM/YYYY)
xii Whether Chairman, Executive Director, Non-Executive Director
Chairman Executive director 🔀 Non Executive Director
x <sup>iii</sup> DIN of such director to whom appointee is alternate
xiv Name of the director to whom such appointee is alternate
xv Name of the company or institution whose nominee theappointee is
xvi E-mail ID of director viraf.mehta1@gmail.com
xvii In case of cessation
Hereby confirmed that the above mentioned $\bigcirc$ Director $\bigcirc$ Managing director xviii is not associated with the company
with effect from (DD/MM/YYYY) xix due to
xx Interest in other entities
xxi Number of such entities
xxii * CIN/LLPIN/FCRN/Registration number Pre-fill
xxiii*Name
xxiv *Address
xxv Nature of interest xxvi *Designation
xxvii Percentage of Shareholding xxviii Amount
xxix Others (specify)

1 Details of the Managing Dire	ector or Director of the company		
i Director Identification Numbe	r (DIN) 07519315 Pre-fill		
<sup>ii</sup> Name	BOMI PESI CHINOY		
iii Father's name	PESI JEHANGIRJI CHINOY		
iv Present residential address	C-7/8, SHAPUR BAUG, VITHALBHAI PATEL ROAD, MUMBAI Maharashtra India 400004		
V Nationality IN	vi Date of birth 07/08/1942 vii Gender Male		
viii 🔿 Appointment 🔵 Ces	ssation  Change in designation × Date of Appointment or 29/09/2022		
ix Designation Director	change in designation		
xi Category Independen	t (DD/MM/YYYY)		
xii Whether Chairman, Executive	Director, Non-Executive Director		
🗌 Chairman 🗌 Executi	ve director 🔀 Non Executive Director		
xiii DIN of such director to whom	n appointee is alternate Pre-fill		
xiv Name of the director to whom appointee is alternate	such		
xv Name of the company or insti appointee is	tution whose nominee the		
xvi E-mail ID of director chinoy.	bomi@yahoo.com		
xvii In case of cessation			
Hereby confirmed that the above	e mentioned O Director O Managing director xviii is not associated with the company		
with effect from	(DD/MM/YYYY) xix due to		
xx Interest in other entities			
xxi Number of such entities			
xxii * CIN/LLPIN/FCRN/Registration	n number Pre-fill		
xxiii*Name			
xxiv *Address			
xxv Nature of interes <sup>xxvi</sup> *Designation	t		
xxvii Percentage of Sh	areholding xxviii Amount		
xxix Others (specify)			

6. Number of manager(s), secretary(s), Chief Financial Officer or Chief Executive Officer for which the form is being filed

## 7. Details of manager(s), secretary(s), Chief Financial Officer or Chief Executive Officer of the company

1       i Director Identification Number (DIN), if any       Pre-fill         ii       Income Tax permanent account number (PAN)       Verify Details         iii       Appointment Cessation       Verify Details
V First Name
vi Middle Name vii Last Name
viii Father's name
ix First Name
X Middle Name
xi Last Name
xii Present residential address xiii Line I
xiv Line II
xv City
xvi State xvii Pin Code
xviii ISO Country Code
xix Country
xx Phone xxi Fax
xxii Date of birth (DD/MM/YYYY)
xxiii Designation
xxiv Date of Appointment or cessation (DD/MM/YYYY)
xxv E-mail ID

Attachments

List of attachments

(1) Declaration by first director Attach	
(2) Declaration of the appointee director Attach	
(3) Notice of resignation; Attach	
(4) Evidence of cessation; Attach	
(6) Optional attachment(s) - if any.	
Rem	ove attachment
Declaration	
I * MALAV ASHWIN DANI	
A person named in the articles as a	of the company
(in case if a new company) or	
X authorized by the Board of Directors of the Company vide 03	
number dated 31/08/2017	
to sign this form and declare that all the requirements of Companies Act, 2013 and the respect of the subject matter of this form and matters incidental thereto have been co that all the information given herein above is true, correct and complete including the at	mplied with. I also declare
nothing material has been suppressed.	
* To be digitally signed by	
* Designation Director	
* Director identification number of the director; or DIN or PAN of the manager or CEO or CFO; or Membership number of the secretary	
Certificate by practicing professional	
I declare that I have been duly engaged for the purpose of certification of this form. It is here through the provisions of the Companies Act, 2013 and Rules thereunder for the subject ma incidental thereto and I have verified the above particulars (including attachment(s)) from th maintained by the Company/applicant which is subject matter of this form and found them to complete and no information material to this form has been suppressed. I further certify that	atter of this form and matters e original/certified records b be true, correct and
The said records have been properly prepared, signed by the required officers of the C per the relevant provisions of the Companies Act, 2013 and were found to be in order	
<ul> <li>All the required attachments have been completely and legibly attached to this form;</li> <li>It is understood that I shall be liable for action under Section 448 of The Con</li> </ul>	noanies Act 2013 for wrong
certification, if any found at any stage.	
* To be digitally signed by AMIKISHOR THAKKAR	
Chartered accountant (in whole-time practice) or Cost accountant (in whole-time	practice) or
<ul> <li>Company secretary (in whole-time practice)</li> </ul>	
*Whether Associate or fellow Associate	
Membership number 6542	
Certificate of Practice Number 6439	
Modify Check Form Prescrutiny	Submit

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.

	RECEI	PT			
	G.A.F	8.7			
<b>SRN :</b> F28937415 Service Request Date : 12/10/2022					
Payment mad	le into : ICICI Bank				
Received Fro	m :				
Name :	PRABHU CHETTIYAR				
Address :	3A, Barodawala Mansion				
	81, Dr. Annie Besant Road Worli				
	Mumbai, Maharashtra				
	IN - 400013				
Entity on who	ose behalf money is paid				
CIN:	U65923MH2011PTC214070				
Name :	SATTVA HOLDING AND TRADING PRIVATE LIMITED				
Address :	Unit No. 205, 2nd Floor, Welspun House,				
	Kamala City, Lower Parel (West), Mumbai 400013				
	Mumbai, Maharashtra				
	India - 400013				
Full Dontioul	ave of Domittones				
	ars of Remittance				
Service Type:	e Filing				
Service Description		Type of Fee	Amount(Rs.)		
	Fee For Form DIR-12	Normal	600.00		
		Total	600.00		
Mode of Payr	nent: Credit Card- ICICI Bank				
Received Pav	ment Rupees: Six Hundred Only				