



**Government of India**

**Form GST REG-06**

[See Rule 10(1)]

**Registration Certificate**

**Registration Number : 27AAQCM4722N1ZU**

|                                                                                                                    |                                               |                                                                                          |            |                                                                                       |                |
|--------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|------------------------------------------------------------------------------------------|------------|---------------------------------------------------------------------------------------|----------------|
| 1.                                                                                                                 | <b>Legal Name</b>                             | MEDIPLANT IMPEX PRIVATE LIMITED                                                          |            |                                                                                       |                |
| 2.                                                                                                                 | <b>Trade Name, if any</b>                     | MEDIPLANT IMPEX PRIVATE LIMITED                                                          |            |                                                                                       |                |
| 3.                                                                                                                 | <b>Additional trade names, if any</b>         |                                                                                          |            |                                                                                       |                |
| 4.                                                                                                                 | <b>Constitution of Business</b>               | Private Limited Company                                                                  |            |                                                                                       |                |
| 5.                                                                                                                 | <b>Address of Principal Place of Business</b> | 1ST FLOOR, S.C. NO.99, S P DEVELOPERS, Shirol, Jaysingpur, Kolhapur, Maharashtra, 416101 |            |                                                                                       |                |
| 6.                                                                                                                 | <b>Date of Liability</b>                      | 22/10/2023                                                                               |            |                                                                                       |                |
| 7.                                                                                                                 | <b>Period of Validity</b>                     | From                                                                                     | 22/10/2023 | To                                                                                    | Not Applicable |
| 8.                                                                                                                 | <b>Type of Registration</b>                   | Regular                                                                                  |            |  |                |
| 9.                                                                                                                 | <b>Particulars of Approving</b>               | Maharashtra                                                                              |            |                                                                                       |                |
| <b>Signature</b>                                                                                                   |                                               |                                                                                          |            |                                                                                       |                |
| <b>Name</b>                                                                                                        |                                               | MINAJ MAHAMMADHAMID SANDE                                                                |            |                                                                                       |                |
| <b>Designation</b>                                                                                                 |                                               | State Tax Officer                                                                        |            |                                                                                       |                |
| <b>Jurisdictional Office</b>                                                                                       |                                               | ICHALKARANJI_703                                                                         |            |                                                                                       |                |
| <b>Date of issue of Certificate</b>                                                                                |                                               | 03/11/2023                                                                               |            |                                                                                       |                |
| Note: The registration certificate is required to be prominently displayed at all places of business in the State. |                                               |                                                                                          |            |                                                                                       |                |

This is a system generated digitally signed Registration Certificate issued based on the approval of application granted on 03/11/2023 by the jurisdictional authority.



**Goods and Services Tax Identification Number: 27AAQCM4722N1ZU**

**Details of Additional Place of Business(s)**

**Legal Name** MEDIPLANT IMPEX PRIVATE LIMITED

**Trade Name, if any** MEDIPLANT IMPEX PRIVATE LIMITED

**Total Number of Additional Places of Business in the State** 0

Goods and Services Tax



**Goods and Services Tax Identification Number: 27AAQCM4722N1ZU**

**Legal Name** MEDIPLANT IMPEX PRIVATE LIMITED

**Trade Name, if any** MEDIPLANT IMPEX PRIVATE LIMITED

**Details of Managing / Whole-time Directors and Key Managerial Persons**

|   |                                                                                    |                    |                     |
|---|------------------------------------------------------------------------------------|--------------------|---------------------|
| 1 |   | Name               | DEVASISH GOSWAMI    |
|   |                                                                                    | Designation/Status | DIRECTOR            |
|   |                                                                                    | Resident of State  | Delhi               |
| 2 |   | Name               | DIPAK VASANT GURAV  |
|   |                                                                                    | Designation/Status | DIRECTOR            |
|   |                                                                                    | Resident of State  | Maharashtra         |
| 3 |  | Name               | PRAJWAL DIPAK GURAV |
|   |                                                                                    | Designation/Status | DIRECTOR            |
|   |                                                                                    | Resident of State  | Maharashtra         |