FORM 20B

[Refer section 159 of the Companies Act, 1956]

Form for filing annual return by a company having a share capital with the Registrar

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

Authorised capital of the company as o	n the date of Filing (in	Rs.)		
1(a) *Corporate identity number (CIN)	of company		Р	re-Fill
(b) Global location number (GLN) of c	ompany			
2(a) Name of the company				
(b) * Address of the Line I registered office of the company Line II				
* City				
* State				
Country				
* Pin Code				
(c) Telephone number with STD code		(d) Fax		
(e) * e-mail ID of the company				
(f) Website				
3.* Whether shares listed on recognise	ed stock exchange	○ Yes	○ No	
If yes, stock e	exchange code:	Α	В	
4.* Financial year end date to which th	e annual general mee	ting (AGM) relates		(DD/MM/YYYY)
5.* Whether annual general meeting (A	AGM) held	○ Yes	○ No	
(a) If yes, date of AGM			(DD/MM/YYYY)	
(b)* Due date of AGM			(DD/MM/YYYY)	
(c)* Whether any extension for financi	al year or AGM grante	ed Yes	O No	
(d) If yes, due date of AGM after grant	of extension		(DD/MM/YYYY)	
I. Capital Structure of the co	mpany as on the	date of AGM or lat	est due date ther	eof
6. * Authorised capital of the company	(in Rs.)			
Break up of Authorised capital				
* Number of equity shares		Total amount of equity	shares (in Rs.)	
Nominal amount per equity share				
*Number of preference shares		Total amount of prefere	ence shares (in Rs.)	
Nominal amount per preference share			, ,	
Number of unclassified shares		Total amount of unclas	sified shares (in Rs.)	
			(111 1 10. <i>)</i>	

7.* Issued capital of the company	(in Rs.)		
Break up of Issued capital	L		
*Number of equity shares		Total amount of equity shares (in Rs.)
Nominal amount per equity share			
*Number of preference shares		Total amount of preference shares (in Rs.)	
Nominal amount per preference share			
8. * Subscribed capital of the compa	any (in Rs.)		
Break up of Subscribed share cap	oital		
*Number of equity shares		Total amount of equity shares (in Rs.)
Nominal amount per equity share			
* Number of preference shares		Total amount of preference shares (in Rs.)	
Nominal amount per preference share		(iii ree.)	
9. * Paid up capital of the company	(in Rs.)		
Break up of Paid up capital			
* Number of equity shares		Total amount of equity shares (in Rs.)
Nominal amount per equity share			
* Number of preference shares		Total amount of preference shares (in Rs.)	
Nominal amount per preference share			
10. *Total debentures of the compar	ny (in Rs.)		
Break up of Debenture			
* Number of non convertible debentures		Total amount of non convertible debentures (in Rs.)	
Nominal amount per non convertible debenture			
* Number of partly convertible debentures		Total amount of partly convertible debentures (in Rs.)	
Nominal amount per partly convertible debenture			
* Number of fully convertible debentures		Total amount of fully convertible debentures (in Rs.)	
Nominal amount per fully convertible debenture			
II. Indebtedness of the company as on the date of AGM or latest due date thereof (secured loans including interest outstanding and accrued but not due for payment)			
11.* Amount	(in Rs.)		

III. Equity share breakup (percentage of total equity) as on the date of AGM or latest due date thereof

S.No.	Category	Percentage
1.	Government [Central and State]	
2.	Government companies	
3.	Public financial companies	
4.	Nationalised or other banks	
5.	Mutual funds	
6.	Venture capital	
7.	Foreign holdings (Foreign institutional investor(s), Foreign companie(Foreign financial institution(s), Non-resident indian(s) or Overseas corporate bodies or Others)	s)
8.	Bodies corporate (not mentioned above)	
9.	Directors or relatives of directors	
10.	Other top fifty (50) shareholders (other than listed above)	
11.	Others	
12.	Total	
rovide Director	s are to be entered only in case date of AGM is on or after 1st July identification number (DIN) in case of director, Managing Director and I tax PAN) in case of manager, secretary Tax PAN Pre-Fill	
Designation	Date of appointment	
Number of equi	ty share(s) held per cent	
Whether he/she	has signed the annual return Yes No	
If yes, date of si	gning (DD/MM/YYYY)	
DIN or Income-t	ax PAN Pre-Fill	
Designation	Date of appointment	
Number of equi		
	has signed the annual return Yes No	
yes, date of si	gning (DD/MM/YYYY)	

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associated with the company since the date of last AGM 13. *Number of director(s), Managing Director, manager and secretary Following details are to be entered only in case date of AGM is on or after 1st July'2007 Provide DIN in case of director, Managing Director and income-tax PAN in case of manager, secretary DIN or Income-tax PAN Pre-Fill Name Designation Date of appointment Date of cessation Ш DIN or Income-tax PAN Pre-Fill Name Designation Date of appointment Date of cessation Ш DIN or Income-tax PAN Pre-Fill Name Designation Date of appointment Date of cessation IV DIN or Income-tax PAN Pre-Fill Name Designation Date of appointment Date of cessation

V. Details of director(s), Managing Director, manager and secretary who ceased to be

14. In case of a listed company, deta	ils of secretary i	n whole time practi	ce certifying	g the annual returr	ו	
Name						
Whether associate or fellow	Associate	Fellow				
Certificate of practice number						
15. * Whether complete list of shareh In case No, then submit the detal seperately with the office of Regis	ils of all the shar	e holders, debentu			○ Yes ○ N	0
Attachments				List of attachm	nents	
1. * Annual return as per schedule \ Companies Act, 1956	/ of the	Attach				
Approval letter for extension of fi or annual general meeting	nancial year	Attach				
3. Optional attachment(s) - if any		Attach				
				Remove attachr	nent	_

Verification I confirm that all the particulars mentioned above are true as per the required under section 159 and Schedule V and which is duly signed best of my knowledge and belief, the information given in this form a	d as required under section 161 of the Act. To the
I have been authorised by the Board of directors' resolution number to sign and submit this form.	* dated * (DD/MM/YYYY)
To be digitally signed by	
Managing Director or director or manager or secretary of the company	
* 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 (include	ding attachment(s)) from the records of
	5 (")
and found them to be true and correct. I further certify that all require attached to this form.	red attachment(s) have been completely
Chartered accountant (in whole-time practice) or Cost acc	countant (in whole-time practice) or
Company secretary (in whole-time practice)	
* Whether associate or fellow Associate Fellow	
* Membership number or certificate of practice number	
Modify Check Form	Prescrutiny

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