Form No. MSC-1

Form language

English

Mindi 💮

Application to ROC for obtaining the status of dormant Company [Pursuant to sub-section (1) of section 455 of The Companies Act, 2013 read with

rule 3 of The Companies (Miscellaneous) Rules, 2014]

सत्यमेव जयते

Refer instruction kit for filing the form

All fields marked in * are mandatory

| Company Information | |
|---|--------------------------------|
| 1 Are you filing the application on the basis of notice issued by ROC to declare the company as a Dormant company? | O Yes O No |
| 2 *Corporate Identity Number (CIN) | |
| 3 (a) *Name of the company | |
| (b) *Registered office address | |
| (c) *Email ID | |
| 4 *Date of incorporation of the company (DD/MM/YYYY) | |
| 5 *Whether the company is incorporated under Companies Act 20 | O13 Any previous Companies Act |
| 6 *Type of company | |
| 7 *Object of the company as per Memorandum of Association (MOA) | |
| Details of Special Resolution | |
| 8 (a) *Date of passing special resolution (DD/MM/YYYY) | |
| (b) *SRN of MGT-14 | |
| Special Act related details | |
| (a) *Whether the objects of the company are being regulated under any special Act? | O Yes O No |
| (b)(i) If Yes, specify Name of the regulator (Reserve Bank of India/Securities and Exchange Board of India/Insurance Regulatory and Development Authority/Others) | V |
| (ii) If Others, please specify | |
| (iii) Date of obtaining the approval/NOC of regulator for obtaining the status of a dormant company (DD/MM/YYYY) | 5 |

| 10 (a) *Number of Dire | ectors | | | |
|--|--|--------------------------------|-------------|----------|
| | | | L | <u> </u> |
| S.No | Director identification number (DIN) | Name | Designation | Category |
| | namber (1914) | | | |
| | | | | ▼ |
| | | | | V |
| | | - | | Ī▼ |
| | | | | |
| 1 Grounds for applica | ition | | | |
| i) The company is forr | med and registered under the | Companies Act, 2013 for: | | |
| _ | _ | · | _ | |
| O any future projec | t O holding an | asset or intellectual proper | ty | |
| ND | | | | |
| (b) The company h | as no significant transaction s | ince incorporation | | |
| (c) The Company h (DD/MM/YYYY) | as not been carrying on any b | usiness or operation since | | |
| d) The company h | as not made any significant ac ancial years | counting transaction durin | g the last | |
| (e) The company hi two or more fin | as not filed financial statemen ancial years | its and annual returns durin | ng the last | |
| ther information | | | | |
| 2 (a) *Whether the co | mpany has any assets or liabil | ities | O Y | es O No |
| (b)(i) *Financial year pertains (DD/N | end date to which last finance | ial statement and annual re | eturn | |
| (ii) Date on which | last financial statement was fi | iled (DD/MM/YYYY) | | |
| (iii) Date on which | last annual return was filed (I | DD/MM/YYYY) | | |
| | statement and annual return cial years, reasons thereof | is not filed for any year in t | he | |
| (c)(i) Date on which I | ast significant accounting tran | nsaction was made (DD/MN | //YYYY) | |
| (ii) Nature of such | transaction | | | |

| Attachments | | | | | |
|---|--|-------------------------|----------------------|--------------|------------|
| (a) Copy of approval or no objection certificate (NOC) from the regulator if applicable | | Max 2-MB | Choose File | Remove Down | Download |
| (b) Optional attachment(s), if any | | Max 2 MB | Choose File | Remove | nsc'nwod |
| Declaration | | | <u>.</u> | | |
| 1* | hereby confirm that | | | | |
| i) no inspection, inquiry or investig ii) no prosecution has been initiate iii) the company is neither having all or interest thereon; | d or pending against the com | pany under any law; | | | nt thereof |
| the company is not having any o there is no dispute in the manag vi) the company does not have any State Government or local author | ement or ownership of the co outstanding statutory taxes, | ompany; | | | |
| vii) the company has not defaulted i | | dues; | | | |
| viii) the securities of the company are | | | le India; | | |
| x) this application has not been ma | de with an objective to decei | ive the creditors or to | defraud any other p | erson. | |
| I am authorised by the Board of I | Directors of the Company vid | le resolution number* | • | | |
| dated* | (DD/MM/YYYY) 1 | to sign this form. | | | |
| a. Whatever is stated in this form a the subject matter of this form h company. | | | | | |
| All the required attachments have true, correct and complete include | ling the attachments to this i | form and nothing mat | erial has been suppr | essed. | |
| i) I understand that furnishing any shall attract punishment under so | | of any information or | Suppression of any a | material inf | ormation |
| To be digitally signed by | | | DSC BOX | | |
| Designation | | | | | |
| Designation Director/Manager/Company Secretary/CFO/CE | n) | | | | ₩ |
| | • | | | | |
| DIN of the director; or DIN or Income or CFO; or membership number of con | Tax PAN of the manager or (| CEO | | | |

Certificate by Practicing Professional

I declare that I have been duly engaged for the purpose of certification of this form. It is hereby certified that I have gone through the provisions of the Companies Act, 2013 and Rules thereunder for the subject matter of this form and matters incidental thereto relevant to this form and I have verified the above particulars (including attachment(s)) from the original/certified records maintained by the Company/applicant which is subject matter of this form and found them to be true, correct and complete and no information material to this form has been suppressed.

| *Membership number/Certificate of practice number Note: Attention is drawn to provisions of section 447 read with 448 and 449 of the Compar punishment for false statement / certificate and punishment for false evidence respectively For office use only: eForm Service request number (SRN) | |
|--|-------------------------------------|
| *Membership number/Certificate of practice number Note: Attention is drawn to provisions of section 447 read with 448 and 449 of the Compar | sies Act, 2013 which provide for |
| | Save Submit |
| | |
| C Associate C Periow | |
| Associate O Fellow | |
| *Whether associate or fellow: | |
| *Designation | |
| *Name | |
| *To be digitally signed by | DSC BOX |
| I hereby duly certify that the company is complying with Rule 3 of the Company (Miscellane) | * ' |
| Statement of affairs attached to the form in excel is made up to a day, not more than thirty of | days before the date of application |
| Declaration by Statutory Auditor *Statement of affairs duly certified by the Auditor(s) of the Company not older than 30 days from the date of the application | Choose File Remove Downloa |
| Certificate of practice number | |
| Membership number | |
| ○ Associate ○ Fellow | |
| Whether associate or fellow: | |
| O Company secretary (in whole-time practice) | |
| Cost accountant (in whole-time practice) or | |
| To be digitally signed by: Chartered accountant (in whole-time practice) or | DSC BOX |
| i. The said records have been properly prepared, signed by the required officers of the Correlevant provisions of the Companies Act, 2013 and were found to be in order; ii. All the required attachments have been completely and legibly attached to this form. | npany and maintained as per the |

I further certify that:

Digital signature of the authorising officer

This eForm is hereby approved

This eForm is hereby rejected

Date of signing (DD/MM/YYYY)

| DSC BOX | | |
|---------|---|---|
| DSC BOX | ı | |
| | | _ |



Form No. MSC-3

Form language

| | English |
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Hindi

Return of dormant company

[Pursuant to sub-section (5) of section 455 of the Companies Act, 2013 read with rule 7 and 8 of the Companies (Miscellaneous) Rules, 2014]

| | ted in * are mandatory | | |
|------------------|--|-------------------------------------|-------------------------------------|
| Company Info | ormation | | |
| 1 *Corporate | Identity Number (CIN) | | |
| 2 (a) *Name o | f the company | | |
| (b) *Register | red office address | | |
| (c) *Email ID | | | |
| 3 *Date of issu | ue of certificate of dormant o | company (DD/MM/YYYY) | |
| 4 *Brief partic | ulars of the principal busines | s activities of the company | |
| 5*Financia! ye | ear end date to which this re | turn relates (DD/MM/YYYY) | |
| Board Meeting | g Details rs of the Board meeting(s) he | eld | |
| o (a) Particulai | | Total number of Directors as on the | Total number of Directors |
| S. No. | Date of meeting (DD/MM/YYYY) | date of meeting | present in the date of meeting |
| S. | | date of meeting (d) | present in the date of meeting (e) |

| Name | DIN/PAN | Designation | *Number of equity share(s) held | Date of cessation (after closure of financial year: If any) (OD/MM/YYYY) |
|------|---------|-------------|------------------------------------|---|
| (b) | (c) | (d) | (e) | (f) |
| | | ▼ | | |

| | the financial year | | | | ···· |
|-----------------|--|---|--|--------------------------|---|
| Name | DIN/PAN | Designation at the beginning / during the financial year | Date of appointment/ chain designation/ cessation (DD/MM/YYYY) | n Nature of change | (Appointment/ Chang tion/ Cessation) |
| (b) | (c) | (d) | (e) | | (f) |
| | | | | | |
| 有些 | | ares | ☐ Equity: | ihares | rence shares |
| or equity share | s, please fill belo | w fields | | | |
| Class of Shares | | Number share | | Total Paid- up amount | Total Premium |
| shares | ription of the cla | ss | | | |
| *At the beginn | 1097 | | | | |
| *Increase durin | | | | | |
| | Public Issue | | | | |
| | lights Issue | | | | |
| | ionus issue | | | | |
| Pr | rivate placement eferential Allotmo | | | | |
| <u> </u> | SOPs | | | | |
| all | weat Equity share otted | es | | | |
| | onversion of eference shares | 12 | | | |
| | onversion of | | | - | |

| Class of Shares | Number of shares | Total Nominal Amount | Total Paid- up amount | Total Premiu |
|--|-----------------------|----------------------|--------------------------|--------------|
| (ix) *GDRs/ADRs | | | | |
| (x) Others specify | - | | | |
| *Decrease during the year | | | · | · |
| (i) *Buy back of shares | | | | |
| (ii) *Shares Forfeited | | | | <u> </u> |
| (iii) *Reduction of share capital | | | | |
| (iv) Others specify | | | | |
| *At the end of the year | | | | |
| or preference shares, please fill below f Class of Shares | ields Number of | Total Nomin | al Total Paid- u | D Total |
| | shares | Amount | amount | Premiur |
| *Description of the class | | | | |
| *At the beginning of the year | | | | |
| *Increase during the year | | | - | |
| (i) *Issue of shares | | | | |
| (ii) *Re-issue of fortifies shares | | | | |
| (ili) Others, specify | | - | | |
| *Decrease during the year | | | | |
| (i) *Redemption of shares | | | | _ |
| (ii) *Shares Forfeited | | | | |
| (iii) *Reduction of share capita | - | | | |
| (iv) Others, specify | | | _ | |
| At the end of the year | | | | |
| articulars of the annual fee (Amount in R | tupees) (Enter the ar | nount to be paid ak | ong | |
| *Whether any significant transaction is | carried out during th | ne year | O Yes (|) No |
| If yes, brief | | | | |

12 Shareholding pattern of the company

| S No. | Category of shareholders | | Percentage as on (DD/MM/YYYY) | Percentage as or (DD/MM/YYYY) |
|----------------|--|--|-------------------------------|-------------------------------|
| 1 | Government (Central and State) | | A DESCRIPTION OF | |
| 2 | Government Companies | | 1 | |
| 3 | Public financial institutions | | _ | |
| 4 | Nationalized or other bank(s) | | _ | |
| 5 | Mutual Funds | | | |
| 6 | Venture Capital | | | |
| 7 | Foreign holdings (Foreign Institutional Investors, Non-resident Indians, Foreign financial institution corporate bodies) | | | |
| 8 | Bodies Corporate (not mentioned above) | | | <u> </u> |
| 9 | Directors or relatives of directors | | | |
| 10 | Other top fifty shareholders (other than mention | ed above) | | |
| 11 | Others | · | | |
| 12 | Total | | _ | |
| | Total number of shareholders | | | |
| chmen | nts | | _ | |
| *Duly | audited statement of financial position | Max 2 MB | Choose File | Remove Down |
|) Optio | onal attachment(s), if any | Max 2 MB | Choose File | Remove |
| aration | | | | |
| MM/Y and th | rised by the Board of Directors of the Company vid YYY)* | Form and declare that matter of this form a | | ereto have been |
| The sta | tus of the Company continues to be a Dormant Company | y under Section 455(1) o | f the Act as on date. | |
| he digi | tally signed by | | DSC BOX | |

| *Designation (Director/Monager/ Company Secretary/CFO/CEO) | ▼ |
|---|--|
| *Director identification number of the director; or DIN or PAN of the manager or CEO or CFO; or Membership number of the company secretary | |
| Certificate by Practicing Professional | |
| I declare that I have been duly engaged for the purpose of certification of this form. This is I the provisions of the Companies Act, 2013 and rules thereunder for the subject matter of and I have verified the above particulars (including attachment(s)) from the original Company/applicant which is subject matter of this form and found them to be true, company to this form has been suppressed. | this form and matters incidental thereto al/certified records maintained by the |
| I further certify that: | |
| The said records have been properly prepared, signed by the required officers of the Comprovisions of the Companies Act, 2013 and were found to be in order; | pany and maintained as per the relevant |
| ii. All the required attachments have been completely and legibly attached to this form. | |
| To be digitally signed by: | DSC BOX |
| Chartered accountant (in whole-time practice) or | |
| Cost accountant (in whole-time practice) or | |
| Company secretary (in whole-time practice) | |
| Whether associate or fellow: | |
| O Associate O Fellow | |
| Membership number | |
| Certificate of practice number | |
| | Save |
| Note: Attention is drawn to provisions of section 447 read with 448 and 449 of the Compa punishment for false statement / certificate and punishment for false evidence respective | |
| This eForm has been taken on file maintained by the Registrar of Companies through electronic statement of correctness given by the company. | tronic mode and on the basis of |
| For office use only: | |
| eForm Service request number (SRN) | |
| eForm filing date (DD/MM/YYYY) | |

Form No. MSC-4

Application for seeking status of active company

[Pursuant to sub-section (5) of section 455 of the Companies Act, 2013 read with rule 8 of the Companies (Miscellaneous) Rules, 2014]

Form language

English

Hindi

| Refer instruction kit for filing the form | Refer | instruction | kit for | filing | the form |
|---|-------|-------------|---------|--------|----------|
|---|-------|-------------|---------|--------|----------|

All fields marked in # and manufatum.

| All fields marked in * are mandatory | | | |
|---|-------------------|------------------|----------------|
| Company Information | | | |
| 1 (a) *Corporate Identity Number (CIN) | | | |
| (b) *Name of the company | | | |
| (c) *Registered office address | | | |
| (d) *Email ID | | | |
| Compliance related details | | | <u> </u> |
| 2 (a) *Whether the company seeks to obtain Active status on according of any condition of 'Dormant company' as specified in Rule 8 (Miscellaneous) Rules, 2014 | • | O Yes | O No |
| (b) Description of non-compliance condition | | | |
| (c) Date of non-compliance (DD/MM/YYYY) | | | |
| SRN Details | | | |
| 3 (a) *Service Request Number (SRN) of Form No.MSC-1 filed for so of dormant company | eeking status | | |
| (b) Service Request Number (SRN) of latest return filed in Form I | No. MSC-3, if any | | |
| Other Details 4 *Company remained in dormant status since (DD/MM/YYYY) | | | |
| 5 *Reasons of dormant status (whether for reasons stated under s section (1) of section 455 or on account of notice issued by ROC company as a Dormant company under sub-section (4) of section | to declare the | | |
| do hereby apply for changer the provisions of sub-section (5) of section 455 of the Compan | | pany from Dorman | t to Active as |
| Attachments | | _ | |
| Optional attachment(s), if any | Max 2 MB | Choose File Re | Download |

| Declaration | | |
|--|--|---|
| I am authorised b | by the Board of Directors of the Company vide resolution no. * | dated |
| (DD/MM/YYYY)* | to sign this form and declare that | all the requirements of Companies Act.2013 |
| and the rules ma with. It is further | de thereunder in respect of the subject matter of this form and matter declared that all the required attachments have been completely, co | ers incidental thereto have been compiled prectly and legibly attached to this form. |
| *To be digitally s | igned by | DSC BOX |
| *Designation | | |
| (Director/Manager/ C | Company Secretary/CFO/CEO) | |
| | cation number of the director; or DIN or PAN of the manager or CEO | |
| or CFO; or Mem | bership number of the company secretary | |
| Certificate by Pra | cticing Professional | |
| the provisions of the and it have veriff Company/applical material to this form. The said reconstruction of the said reconstruction of the said reconstruction of the said reconstruction. | we been duly engaged for the purpose of certification of this form. It the Companies Act, 2013 and Rules thereunder for the subject matter ied the above particulars (including attachment(s)) from the ornt which is subject matter of this form and found them to be true orm has been suppressed. I further certify that: ds have been properly prepared, signed by the required officers of the sions of the Companies Act, 2013 and were found to be in order; d attachments have been completely and legibly attached to this form | or of this form and matters incidental thereto iginal/certified records maintained by the correct and complete and no information the Company and maintained as per the |
| To be digitally sign | ned by: | DSCBOX |
| Chartered acc | countant (in whole-time practice) or | |
| O Cost accounta | ant (in whole-time practice) or | |
| O Company secr | retary (in whole-time practice) | |
| Whether associate | e or fellow: | |
| Associate | O Fellow | |
| Membership numi | ber | |
| Certificate of pract | tice number | |
| | | Save "Submit |
| Note: Attention is punishment for fal | drawn to provisions of section 447 read with 448 and 449 of the Co ise statements/ certificate and punishment for false evidence respe | ompanies Act, 2013 which provide for ctively. |
| For office use only: | | |
| eForm Service requ | uest number (SRN) | |
| | | |

| eForm filing date (DD/MM/YYYY) | |
|--|---------|
| Digital signature of the authorising officer | |
| This eForm is hereby approved | DSCBOX |
| This eForm is hereby rejected | DSC BOX |
| Date of signing (DD/MM/YYYY) | |