

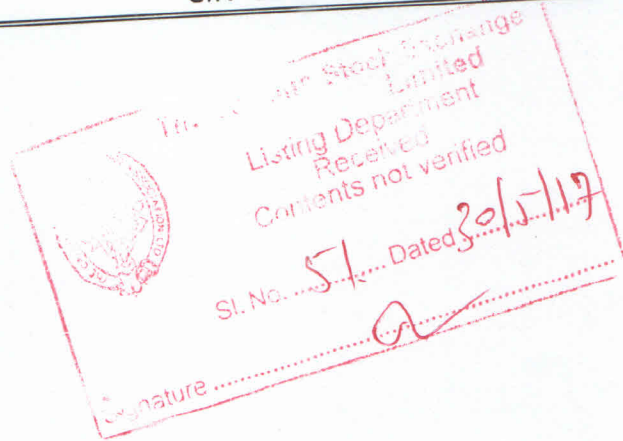
D/C

CONSORTIUM VYAPAAR LIMITED

21 PARSEE CHURCH STREET
OPP.18, EZRA STREET, KOLKATA-700001,
PHONE NUMBER: - 9830091493
Email-corp.consortium@gmail.com
CIN- L51109WB1993PLC060873

Date: 30/5/2017

To,
The Secretary,
The Calcutta Stock Exchange Ltd.
7, Lyons Range,
Kolkata - 700 001



Sub: - Regulation 30 of Sebi (LODR)

Dear Sir,

With reference to the above we are hereby submitting Regulation 30 for the financial year 2017-18.

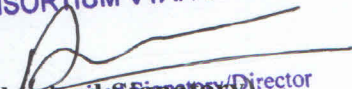
Please find the same and acknowledge the receipt.

This is for Compliance and your record.

Thanking You,

Yours Faithfully.

For Consortium Vyapaar Limited
CONSORTIUM VYAPAAR LTD.


(Authorized Signatory/Director)

Encl: As above

CONSORTIUM VYAPAAR LIMITED

21 PARSEE CHURCH STREET
OPP.18, EZRA STREET, KOLKATA-700001,

PHONE NUMBER:- 9830091493

Email-corp.consortium@gmail.com

CIN NO- L51109WB1993PLC060873

Date:

To,

The General Manager

Calcutta Stock Exchange Limited

7, Lyons Range,

Kolkata- 700001

Sub: Regulation 30 of SEBI LODR

Dear Sir,

This is to intimate CSE that Ms. Pooja Kishansingh Yadav (DIN 07811582) was appointed as an Additional Director in the capacity of Independent Director at the Board meeting of the Company held on 05/05/2017.

A copy of form and challan filed is enclosed for your reference.

Please take note of the same.

For, CONSORTIUM VYAPAAR LIMITED.

CONSORTIUM VYAPAAR LTD.

Authorised Signatory

Authorised Signatory/Director

MINISTRY OF CORPORATE AFFAIRS
RECEIPT
G.A.R. 7

Service Request Date : 16/05/2017

SRN : G43746635

Payment made into : HDFC Bank

Received From :

Name : ARSK and Associates
Address : 22 R. N. MUKHERJEE ROAD

KOLKATA, West Bengal
India - 700001

Entity on whose behalf money is paid

CIN: L51109WB1993PLC060873
Name : CONSORTIUM VYAPAAR LTD
Address : C/O BUSINESS COMMUNICATION CENTRE
21, PARSEE CHURCH STREET, OPP. 18, EZRA STREET
KOLKATA, West Bengal
India - 700001

Full Particulars of Remittance

Service Type: eFiling

Service Description	Type of Fee	Amount(Rs.)
Fee For Form DIR-12	Normal	600.00
Total		600.00

Mode of Payment: Internet Banking - HDFC Bank

Received Payment Rupees: Six Hundred Only

Note -The Registrar may examine this eForm any time after the same is processed by the system under Straight Through Process (STP). In case any defects or incompleteness in any respect is noticed by the Registrar , then this eForm shall be treated and labeled as defective and the eForm shall have to be filed afresh with the fee and additional fee, as applicable. (Please refer Rule 10 of the Companies (Registration offices offices and Fees) Rules, 2014)

FORM NO. DIR-12

[Pursuant to sections 7(1) (c), 168 & 170 (2) of The Companies Act, 2013 and rule 17 of the Companies (Incorporation) Rules 2014 and 8, 15 & 18 of the Companies (Appointment and Qualification of Directors) Rules, 2014]



Particulars of appointment of directors and the key managerial personnel and the changes among them

Form Language

☒ English ☐ Hindi

Refer the instruction kit for filing the form.

1. *This form is for ☐ New company ☒ existing company

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

L51109WB1993PLC060873

(b) Global location number (GLN) of company

Pre-fill

3. (a) Name of the company

CONSORTIUM VYAPAAR LTD

(b) Address of the registered office of the company

C/O BUSINESS COMMUNICATION CENTRE
21, PARSEE CHURCH STREET, OPP. 18, EZRA STREET
KOLKATA
West Bengal
700001
India

(c) E-mail ID of the company corp.consortium@gmail.com

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

1

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

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

iv Membership number of the secretary

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