

# FORM No. DIR-11

[Pursuant to proviso to section 168 (1) of The Companies Act, 2013 and rule 16 of The Companies (Appointment and Qualification of Directors) Rules, 2014]



Notice of resignation of a director to the Registrar

Form Language ☒ English ☐ Hindi

Refer the instruction kit for filing the form.

Notice is hereby given that,

the director of M/s

has/have resigned from the office of director of the company with effect from

the details of which are given below:

1. Details of the company

(a)\*CIN

(b) GLN

(c) Name of the company

(d) Registered office address

(e) Email ID of the company

2. Details of the director resigning from such company

(a)\*Director Identification Number (DIN)

(b) Name

(c) Nationality

3. (a)\*Date of appointment

(b)\*Designation

(c)\*Category

4. (a) \*Date of filing of resignation with the company

(b) Effective date of resignation specified in the notice of resignation, if any

5. \* Reasons for resignation

6. \*Whether confirmation is received from the company ☒ Yes ☐ No

#### Attachment(s)

- (1) \*Notice of resignation filed with the company;
- (2) \*Proof of dispatch;
- (4) Optional attachment(s) - if any

Attach

Attach

Attach

#### List of attachments

Notice of Resignation.pdf  
Proof of Dispatch.pdf  
Acknowledgement.pdf  
Notice of Resignation.pdf  
Proof of Dispatch.pdf

Remove Attachments

#### Declaration

HEMENDRA MAPARA HARIDAS, the applicant do solemnly declare that to the best of my/our knowledge and belief the information given in this return is correct and complete.

\*To be digitally signed by Director

DIN 06736527

HEMENDRA  
HARIDAS  
MAPARA

Note: Attention is also drawn to provisions of Section 448 and 449 which provide for punishment for false statement and punishment for false evidence respectively.

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.

# FORM No. DIR-11



## Notice of resignation of a director to the Registrar

[Pursuant to proviso to section 168 (1) of The Companies Act, 2013 and rule 16 of The Companies (Appointment and Qualification of Directors) Rules, 2014]

Form Language ☒ English ☐ Hindi

Refer the instruction kit for filing the form.

Notice is hereby given that , **DARSHNA HEMENDRA MAPARA**

the director of M/s **RELSTRUCT HOMES PRIVATE LIMITED**

has/have resigned from the office of director of the company with effect from **7/16/18**

the details of which are given below:

1. Details of the company

(a)\*CIN

**U70109MH2013PTC246598**

Pre-fill

(b) GLN

(c) Name of the company

**RELSTRUCT HOMES PRIVATE LIMITED**

(d) Registered office address

**Flat No. 201-2, 2nd Floor, Sunshine Plaza,  
Subhash Lane, Malad East  
Mumbai  
Mumbai City  
Maharashtra**

(e) Email ID of the company

**ca.jaypandey@gmail.com**

2. Details of the director resigning from such company

(a)\*Director Identification Number (DIN)

**06736532**

Pre-fill

(b) Name

**DARSHNA HEMENDRA MAPARA**

(c) Nationality

**IN**

3. (a)\*Date of appointment

**04/04/2018**

(b)\*Designation

**Director**

(c)\*Category

**Promoter**

4. (a) \*Date of filing of resignation with the company

**11/07/2018**

(b) Effective date of resignation specified in the notice of resignation, if any

**16/07/2018**

5. \* Reasons for resignation

**Due to Pre-Occupation**

6. \*Whether confirmation is received from the company ☒ Yes ☐ No

#### Attachment(s)

- (1) \*Notice of resignation filed with the company;  
(2) \*Proof of dispatch;  
(4) Optional attachment(s) - if any

Attach

Attach

Attach

#### List of attachments

Notice of Resignation.pdf  
Proof of Dispatch.pdf  
Acknowledgement.pdf  
Notice of Resignation.pdf  
Proof of Dispatch.pdf

Remove Attachments

#### Declaration

I **DARSHNA HEMENDRA MAPARA**, the applicant do solemnly declare that to the best of my/our knowledge and belief the information given in this return is correct and complete.

\*To be digitally signed by Director

DIN **06736532**

Digitally signed by  
DARSHNA H  
MAPARA  
H MAPARA  
Date: 2018.08.22  
12:48:05 +05'30'

**Note: Attention is also drawn to provisions of Section 448 and 449 which provide for punishment for false statement and punishment for false evidence respectively.**

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.

# FORM No. DIR-11



## Notice of resignation of a director to the Registrar

[Pursuant to proviso to section 168 (1) of The Companies Act, 2013 and rule 16 of The Companies (Appointment and Qualification of Directors) Rules, 2014]

Form Language ☒ English ☐ Hindi

Refer the instruction kit for filing the form.

Notice is hereby given that, CHETAN HARIDAS MAPARA

the director of M/s RELSTRUCT HOMES PRIVATE LIMITED

has/have resigned from the office of director of the company with effect from 4/6/18

the details of which are given below:

### 1. Details of the company

(a)\*CIN

U70109MH2013PTC246598

Pre-fill

(b) GLN

(c) Name of the company

RELSTRUCT HOMES PRIVATE LIMITED

(d) Registered office address

Flat No. 201-2, 2nd Floor, Sunshine Plaza,  
Subhash Lane, Malad East  
Mumbai  
Mumbai City  
Maharashtra

(e) Email ID of the company

ca.jaypandey@gmail.com

### 2. Details of the director resigning from such company

(a)\*Director Identification Number (DIN)

06736522

Pre-fill

(b) Name

CHETAN HARIDAS MAPARA

(c) Nationality

IN

### 3. (a)\*Date of appointment

22/11/2013

(b)\*Designation

Director

(c)\*Category

Promoter

### 4. (a) \*Date of filing of resignation with the company

05/04/2018

(b) Effective date of resignation specified in the notice of resignation, if any

06/04/2018

### 5. \* Reasons for resignation

Due to Pre-Occupation

6. \*Whether confirmation is received from the company ☒ Yes ☐ No

#### Attachment(s)

- (1) \*Notice of resignation filed with the company;  
(2) \*Proof of dispatch;  
(4) Optional attachment(s) - if any

Attach

Attach

Attach

#### List of attachments

Notice of Resignation.pdf  
Proof of Dispatch.pdf  
Acknowledgement.pdf  
Notice of Resignation.pdf  
Proof of Dispatch.pdf

Remove Attachments

#### Declaration

I **CHETAN HARIDAS MAPARA**, the applicant do solemnly declare that to the best of my/our knowledge and belief the information given in this return is correct and complete.

\*To be digitally signed by Director

DIN **06736522**

CHETAN H  
MAPARA

**Note: Attention is also drawn to provisions of Section 448 and 449 which provide for punishment for false statement and punishment for false evidence respectively.**

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.

# 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) \* Corporate Identity Number (CIN) of company U70109MH2013PTC246598

(b) Global location number (GLN) of company

Pre-fill

3. (a) Name of the company RELSTRUCT HOMES PRIVATE LIMITED

(b) Address of the registered office of the company

Flat No. 201-2, 2nd Floor, Sunshine Plaza,  
Subhash Lane, Malad East  
Mumbai  
Mumbai City  
Maharashtra  
400097

(c) E-mail ID of the company ca.jaypandey@gmail.com

4. Number of Managing director 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

i Director Identification Number (DIN)

06736532

Pre-fill

ii Name

DARSHNA HEMENDRA MAPARA

iii Father's name

HASMUKHBHAI NATWARLAL SHAH

iv Present residential address

6/11, The Malad CHS., 2nd Floor, Podar Park,  
Podar Road, Malad (E),  
Mumbai  
Maharashtra  
India  
400097

v Nationality

IN

vi Date of birth

26/09/1969

vii Gender

Female

viii ☒ Appointment ☐ Cessation ☐ Change in designation

x Date of Appointment or  
change in designation

04/04/2018

(DD/MM/YYYY)

ix Designation

Director

xi Category

Promoter

xii Whether Chairman, Executive Director, Non-Executive Director

☐ Chairman ☒ Executive director ☐ Non Executive Director

xiii DIN of such director to whom appointee is alternate

Pre-fill

xiv Name of the director to whom such  
appointee is alternate

xv Name of the company or institution whose nominee the  
appointee is

xvi E-mail ID of director

relianceenterprise@rediffmail.com

xvii In case of cessation

Hereby confirmed that the above mentioned ☐ Director ☐ 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

1

xxii \* CIN/LLPIN/FCRN/Registration number

U70102MH2013PTC248209

Pre-fill

xxiii \* Name

RELSTRUCT REALTORS PRIVATE LIMITED

xxiv \* Address

Flat No. 201-2, 2nd Floor, Sunshine Plaza, Subhash Lane, Malad East Mumbai Mumbai City Maharashtra

xxv Nature of interest

xxvi \* Designation

Additional Director

xxvii Percentage of Shareholding

17.61

xxviii Amount

2530000

xxix Others (specify)

1 Details of the Managing Director or Director of the company

i Director Identification Number (DIN)

06736537

Pre-fill

ii Name

NIKITA HEMENDRA MAPARA

iii Father's name

HEMENDRA HARIDAS MAPARA

iv Present residential address

6/11, The Malad CHS., 2nd Floor, Podar Park,  
Podar Road, Malad (E),  
Mumbai  
Maharashtra  
India  
400097

v Nationality

IN

vi Date of birth

03/01/1992

vii Gender

Female

viii ☒ Appointment ☐ Cessation ☐ Change in designation

x Date of Appointment or  
change in designation

04/04/2018

(DD/MM/YYYY)

ix Designation

Director

xi Category

Promoter

xii Whether Chairman, Executive Director, Non-Executive Director

☐

Chairman

☒

Executive director

☐

Non Executive Director

xiii 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 the  
appointee is

xvi E-mail ID of director

nikita.socio@gmail.com

xvii In case of cessation

Hereby confirmed that the above mentioned ☐ Director ☐ 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

0

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)

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

Attachments

List of attachments

- (1) Declaration by first director
- (2) Declaration of the appointee director in Form No. DIR-2;
- (3) Notice of resignation;
- (4) Evidence of cessation;

(6) Optional attachment(s) - if any.

Attach  
Attach  
Attach  
Attach  
Attach

DIR-2 and DIR-8.pdf  
Appointment Letter.pdf  
Resolution For Appointment.pdf

Remove attachment

### Declaration

I \* HEMENDRA MAPARA HARIDAS

of the company

☐ A person named in the articles as a

(in case if a new company) or

☒ authorized by the Board of Directors of the Company vide 01 & 02

number dated 26/03/2018

to sign this form and declare that all the requirements of Companies Act, 2013 and the rules made thereunder in respect of the subject matter of this form and matters incidental thereto have been complied with. I also declare that all the information given herein above is true, correct and complete including the attachments to this form and nothing material has been suppressed.

\* To be digitally signed by

HEMENDRA  
HARIDAS  
MAPARA

\* 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

06736527

### 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 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. I further certify that:

- ☐ The said records have been properly prepared, signed by the required officers of the Company and maintained as per the relevant provisions of the Companies Act, 2013 and were found to be in order;
- ☐ All the required attachments have been completely and legibly attached to this form;
- ☐ It is understood that I shall be liable for action under Section 448 of The Companies Act, 2013 for wrong certification, if any found at any stage.

\* To be digitally signed by

- ☐ Chartered accountant (in whole-time practice) or
- ☐ Cost accountant (in whole-time practice) or
- ☐ Company secretary (in whole-time practice)

\* Whether Associate or fellow ☐ Associate ☐ Fellow

Membership number

Certificate of Practice Number

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.

# 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) \* Corporate Identity Number (CIN) of company

U70109MH2013PTC246598

(b) Global location number (GLN) of company

Pre-fill

3. (a) Name of the company

RELSTRUCT HOMES PRIVATE LIMITED

(b) Address of the registered office of the company

Flat No. 201-2, 2nd Floor, Sunshine Plaza,  
Subhash Lane, Malad East  
Mumbai  
Mumbai City  
Maharashtra  
400097

(c) E-mail ID of the company

ca.jaypandey@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

1 Details of the Managing Director or Director of the company

i Director Identification Number (DIN)

08177370

Pre-fill

ii Name

RAJESH NIRANJAN MEHTA

iii Father's name

NIRANJAN JAYANTILAL MEHTA

iv Present residential address

3-B/1, Mithila Pushpa CHS LTD.  
M.B. Estate, Behind Ram Mandir, Virar (West)  
Thane  
Maharashtra  
India  
401305

v Nationality

IN

vi Date of birth

15/04/1976

vii Gender

Male

viii ☒ Appointment ☐ Cessation ☐ Change in designation

x Date of Appointment or  
change in designation

10/07/2018

(DD/MM/YYYY)

ix Designation

Director

xi Category

Professional

xii Whether Chairman, Executive Director, Non-Executive Director

☐

Chairman

☐

Executive director

☒

Non Executive Director

xiii DIN of such director to whom appointee is alternate

Pre-fill

xiv Name of the director to whom such  
appointee is alternate

xv Name of the company or institution whose nominee the  
appointee is

xvi E-mail ID of director

vrajfashion76@gmail.com

xvii In case of cessation

Hereby confirmed that the above mentioned ☐ Director ☐ 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

0

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)

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                      | <input type="text"/> | <input type="button" value="Pre-fill"/>       |                               |
|   | ii    | Income Tax permanent account number (PAN)                         | <input type="text"/> | <input type="button" value="Verify Details"/> |                               |
|   | iii   | <input type="radio"/> Appointment <input type="radio"/> Cessation |                      |                                               |                               |
|   | iv    | Membership number of the secretary                                | <input type="text"/> |                                               |                               |
|   | v     | First Name                                                        | <input type="text"/> |                                               |                               |
|   | vi    | Middle Name                                                       | <input type="text"/> |                                               |                               |
|   | vii   | Last Name                                                         | <input type="text"/> |                                               |                               |
|   | viii  | <b>Father's name</b>                                              |                      |                                               |                               |
|   | ix    | First Name                                                        | <input type="text"/> |                                               |                               |
|   | x     | Middle Name                                                       | <input type="text"/> |                                               |                               |
|   | xi    | Last Name                                                         | <input type="text"/> |                                               |                               |
|   | xii   | Present residential address                                       | xiii                 | Line I <input type="text"/>                   |                               |
|   |       |                                                                   | xiv                  | Line II <input type="text"/>                  |                               |
|   | xv    | City                                                              | <input type="text"/> |                                               |                               |
|   | xvi   | State                                                             | <input type="text"/> | xvii                                          | Pin Code <input type="text"/> |
|   | xviii | ISO Country Code                                                  | <input type="text"/> |                                               |                               |
|   | xix   | Country                                                           | <input type="text"/> |                                               |                               |
|   | xx    | Phone                                                             | <input type="text"/> | xxi                                           | Fax <input type="text"/>      |
|   | xxii  | Date of birth                                                     | <input type="text"/> | (DD/MM/YYYY)                                  |                               |
|   | xxiii | Designation                                                       | <input type="text"/> |                                               |                               |
|   | xxiv  | Date of Appointment or cessation                                  | <input type="text"/> | (DD/MM/YYYY)                                  |                               |
|   | xxv   | E-mail ID                                                         | <input type="text"/> |                                               |                               |

Attachments

List of attachments

- (1) Declaration by first director
- (2) Declaration of the appointee director in Form No. DIR-2;
- (3) Notice of resignation;
- (4) Evidence of cessation;

Attach

Attach

Attach

Attach

Attach

DIR-2 and DIR-8.pdf  
Appointment Letter.pdf  
Resolution with Explanatory Statement.pdf

Remove attachment

(6) Optional attachment(s) - if any.

### Declaration

I \* Nikita Hemendra Mapara

- ☐ A person named in the articles as a [ ] of the company  
(in case if a new company) or  
☒ authorized by the Board of Directors of the Company vide [02]  
number dated [29/06/2018]

to sign this form and declare that all the requirements of Companies Act, 2013 and the rules made thereunder in respect of the subject matter of this form and matters incidental thereto have been complied with. I also declare that all the information given herein above is true, correct and complete including the attachments to this form and nothing material has been suppressed.

\* To be digitally signed by

NIKITA H  
MAPARA

\* 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

[06736537]

### 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 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. I further certify that:

- ☐ The said records have been properly prepared, signed by the required officers of the Company and maintained as per the relevant provisions of the Companies Act, 2013 and were found to be in order ;  
☐ All the required attachments have been completely and legibly attached to this form;  
☐ It is understood that I shall be liable for action under Section 448 of The Companies Act, 2013 for wrong certification, if any found at any stage.

\* To be digitally signed by [ ]

- ☐ Chartered accountant (in whole-time practice) or ☐ Cost accountant (in whole-time practice) or  
☐ Company secretary (in whole-time practice)

\* Whether Associate or fellow ☐ Associate ☐ Fellow

Membership number [ ]

Certificate of Practice Number [ ]

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.

DS MINISTRY  
OF  
CORPORATE  
AFFAIRS 23

# 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) \* Corporate Identity Number (CIN) of company

U70109MH2013PTC246598

(b) Global location number (GLN) of company

Pre-fill

3. (a) Name of the company

RELSTRUCT HOMES PRIVATE LIMITED

(b) Address of the  
registered office  
of the company

Flat No. 201-2, 2nd Floor, Sunshine Plaza,  
Subhash Lane, Malad East  
Mumbai  
Mumbai City  
Maharashtra  
400097

(c) E-mail ID of the company

ca.jaypandey@gmail.com

4. Number of Managing director 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

i Director Identification Number (DIN)

02961906

Pre-fill

ii Name

MANHARBHAI KARSHANBHAI PATEL

iii Father's name

KARSHANBHAI GANDABHAI PATEL

iv Present residential address

Madhela Faliya, Ponsari, Bigri  
Navsari  
Gujarat  
India  
396110

v Nationality

IN

vi Date of birth

01/06/1976

vii Gender

Male

viii ☒ Appointment ☐ Cessation ☐ Change in designation

x Date of Appointment or  
change in designation

01/11/2018

ix Designation

Additional director

(DD/MM/YYYY)

xi Category

Professional

xii Whether Chairman, Executive Director, Non-Executive Director

☐ Chairman ☐ Executive director ☒ Non Executive Director

xiii DIN of such director to whom appointee is alternate

Pre-fill

xiv Name of the director to whom such  
appointee is alternate

xv Name of the company or institution whose nominee the  
appointee is

xvi E-mail ID of director

manharp148@gmail.com

xvii In case of cessation

Hereby confirmed that the above mentioned ☐ Director ☐ 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

2

xxii \* CIN/LLPIN/FCRN/Registration number

U05000GJ2017PTC096188

Pre-fill

xxiii \* Name

DEVIKRUPA AQUACULTURE PRIVATE LIMITED

xxiv \* Address

S.R. NO.1-3093/94/96 J C PARK OPP. HONEST CO. CHIKHLI RD. GOHARBAUG BIL Navsari Gujarat 39

xxv Nature of interest

xxvi \* Designation

Director

xxvii Percentage of Shareholding

xxviii Amount

xxix Others (specify)

1 Details of the Managing Director or Director of the company

|                                                                                                                                                                                                                                              |                                                                                                                                |                                                          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| i Director Identification Number (DIN)                                                                                                                                                                                                       | <input type="text" value="05104793"/>                                                                                          | <input type="button" value="Pre-fill"/>                  |
| ii Name                                                                                                                                                                                                                                      | <input type="text" value="JAGRUTI MANHARBHAI PATEL"/>                                                                          |                                                          |
| iii Father's name                                                                                                                                                                                                                            | <input type="text" value="RAMANLAL PATEL"/>                                                                                    |                                                          |
| iv Present residential address                                                                                                                                                                                                               | <input type="text" value="Madhela Faliya,Ponsari,Bigri&lt;br/&gt;Navsari&lt;br/&gt;Gujarat&lt;br/&gt;India&lt;br/&gt;396110"/> |                                                          |
| v Nationality                                                                                                                                                                                                                                | <input type="text" value="IN"/>                                                                                                | vi Date of birth <input type="text" value="23/06/1983"/> |
|                                                                                                                                                                                                                                              |                                                                                                                                | vii Gender <input type="text" value="Male"/>             |
| viii <input checked="" type="radio"/> Appointment <input type="radio"/> Cessation <input type="radio"/> Change in designation                                                                                                                | x Date of Appointment or change in designation <input type="text" value="01/11/2018"/><br>(DD/MM/YYYY)                         |                                                          |
| ix Designation                                                                                                                                                                                                                               | <input type="text" value="Additional director"/>                                                                               |                                                          |
| xi Category                                                                                                                                                                                                                                  | <input type="text" value="Professional"/>                                                                                      |                                                          |
| xii Whether Chairman, Executive Director, Non-Executive Director                                                                                                                                                                             |                                                                                                                                |                                                          |
| <input type="checkbox"/> Chairman <input type="checkbox"/> Executive director <input checked="" type="checkbox"/> Non Executive Director                                                                                                     |                                                                                                                                |                                                          |
| xiii DIN of such director to whom appointee is alternate                                                                                                                                                                                     | <input type="text"/>                                                                                                           | <input type="button" value="Pre-fill"/>                  |
| xiv Name of the director to whom such appointee is alternate                                                                                                                                                                                 | <input type="text"/>                                                                                                           |                                                          |
| xv Name of the company or institution whose nominee the appointee is                                                                                                                                                                         | <input type="text"/>                                                                                                           |                                                          |
| xvi E-mail ID of director                                                                                                                                                                                                                    | <input type="text" value="manharp148@gmail.com"/>                                                                              |                                                          |
| xvii In case of cessation                                                                                                                                                                                                                    |                                                                                                                                |                                                          |
| Hereby confirmed that the above mentioned <input type="radio"/> Director <input type="radio"/> Managing director xviii is not associated with the company with effect from <input type="text"/> (DD/MM/YYYY) xix due to <input type="text"/> |                                                                                                                                |                                                          |
| xx Interest in other entities                                                                                                                                                                                                                |                                                                                                                                |                                                          |
| xxi Number of such entities                                                                                                                                                                                                                  | <input type="text" value="2"/>                                                                                                 |                                                          |
| xxii *CIN/LLPIN/FCRN/Registration number                                                                                                                                                                                                     | <input type="text" value="U05000GJ2017PTC096188"/>                                                                             | <input type="button" value="Pre-fill"/>                  |
| xxiii * Name                                                                                                                                                                                                                                 | <input type="text" value="DEVIKRUPA AQUACULTURE PRIVATE LIMITED"/>                                                             |                                                          |
| xxiv *Address                                                                                                                                                                                                                                | <input type="text" value="S.R. NO.1-3093/94/96 J C PARK OPP. HONEST CO. CHIKHLI RD. GOHARBAUG BIL Navsari Gujarat 39"/>        |                                                          |
| xxv Nature of interest                                                                                                                                                                                                                       |                                                                                                                                |                                                          |
| xxvi *Designation                                                                                                                                                                                                                            | <input type="text" value="Director"/>                                                                                          |                                                          |
| xxvii Percentage of Shareholding                                                                                                                                                                                                             | <input type="text"/>                                                                                                           | xxviii Amount <input type="text"/>                       |
| xxix Others (specify)                                                                                                                                                                                                                        | <input type="text"/>                                                                                                           |                                                          |

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                      | <input type="text"/> | <input type="button" value="Pre-fill"/>       |
|   | ii    | Income Tax permanent account number (PAN)                         | <input type="text"/> | <input type="button" value="Verify Details"/> |
|   | iii   | <input type="radio"/> Appointment <input type="radio"/> Cessation |                      |                                               |
|   | iv    | Membership number of the secretary                                | <input type="text"/> |                                               |
|   | v     | First Name                                                        | <input type="text"/> |                                               |
|   | vi    | Middle Name                                                       | <input type="text"/> |                                               |
|   | vii   | Last Name                                                         | <input type="text"/> |                                               |
|   | viii  | <b>Father's name</b>                                              |                      |                                               |
|   | ix    | First Name                                                        | <input type="text"/> |                                               |
|   | x     | Middle Name                                                       | <input type="text"/> |                                               |
|   | xi    | Last Name                                                         | <input type="text"/> |                                               |
|   | xii   | Present residential address                                       | xiii Line I          | <input type="text"/>                          |
|   |       |                                                                   | xiv Line II          | <input type="text"/>                          |
|   | xv    | City                                                              | <input type="text"/> |                                               |
|   | xvi   | State                                                             | <input type="text"/> | xvii Pin Code <input type="text"/>            |
|   | xviii | ISO Country Code                                                  | <input type="text"/> |                                               |
|   | xix   | Country                                                           | <input type="text"/> |                                               |
|   | xx    | Phone                                                             | <input type="text"/> | xxi Fax <input type="text"/>                  |
|   | xxii  | Date of birth                                                     | <input type="text"/> | (DD/MM/YYYY)                                  |
|   | xxiii | Designation                                                       | <input type="text"/> |                                               |
|   | xxiv  | Date of Appointment or cessation                                  | <input type="text"/> | (DD/MM/YYYY)                                  |
|   | xxv   | E-mail ID                                                         | <input type="text"/> |                                               |

**Attachments**

List of attachments

- (1) Declaration by first director
- (2) Declaration of the appointee director in Form No. DIR-2;
- (3) Notice of resignation;
- (4) Evidence of cessation;
- (5) Interest in other entities;
- (6) Optional attachment(s) - if any.

|        |                                                                                               |
|--------|-----------------------------------------------------------------------------------------------|
| Attach | DIR-2.pdf<br>Interest in Other Entities.pdf<br>Board Resolution.pdf<br>Appointment Letter.pdf |
| Attach |                                                                                               |
| Attach |                                                                                               |
| Attach |                                                                                               |
| Attach |                                                                                               |
| Attach | Remove attachment                                                                             |

### Declaration

I \* **NIKITA HEMENDRA MAPARA**

- ☐ A person named in the articles as a \_\_\_\_\_ of the company  
(in case if a new company) or
- ☒ authorized by the Board of Directors of the Company vide \_\_\_\_\_  
number dated **01/11/2018**

to sign this form and declare that all the requirements of Companies Act, 2013 and the rules made thereunder in respect of the subject matter of this form and matters incidental thereto have been complied with. I also declare that all the information given herein above is true, correct and complete including the attachments to this form and nothing material has been suppressed.

\* To be digitally signed by

NIKITA H  
MAPARA

\* 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

**06736537**

### 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 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. I further certify that:

- ☐ The said records have been properly prepared, signed by the required officers of the Company and maintained as per the relevant provisions of the Companies Act, 2013 and were found to be in order ;
- ☐ All the required attachments have been completely and legibly attached to this form;
- ☐ It is understood that I shall be liable for action under Section 448 of The Companies Act, 2013 for wrong certification, if any found at any stage.

\* To be digitally signed by

- ☐ Chartered accountant (in whole-time practice) or ☐ Cost accountant (in whole-time practice) or  
☐ Company secretary (in whole-time practice)

\* Whether Associate or fellow ☐ Associate ☐ Fellow

Membership number

Certificate of Practice Number

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.

# 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) \* Corporate Identity Number (CIN) of company

U70109MH2013PTC246598

(b) Global location number (GLN) of company

Pre-fill

3. (a) Name of the company

RELSTRUCT HOMES PRIVATE LIMITED

(b) Address of the registered office of the company

Flat No. 201-2, 2nd Floor, Sunshine Plaza,  
Subhash Lane, Malad East  
Mumbai  
Mumbai City  
Maharashtra  
400097

(c) E-mail ID of the company

ca.jaypandey@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

1 Details of the Managing Director or Director of the company

i Director Identification Number (DIN)

06736532

Pre-fill

ii Name

DARSHNA HEMENDRA MAPARA

iii Father's name

HASMUKHBHAI NATWARLAL SHAH

iv Present residential address

6/11, The Malad CHS., 2nd Floor, Podar Park,  
Podar Road, Malad (E),  
Mumbai  
Maharashtra  
India  
400097

v Nationality

IN

vi Date of birth

26/09/1969

vii Gender

Female

viii ☐ Appointment ☒ Cessation ☐ Change in designation

x Date of Appointment or  
change in designation

(DD/MM/YYYY)

ix Designation

Director

xi Category

xii Whether Chairman, Executive Director, Non-Executive Director

☐

Chairman

☐

Executive director

☐

Non Executive Director

xiii DIN of such director to whom appointee is alternate

Pre-fill

xiv Name of the director to whom such  
appointee is alternate

xv Name of the company or institution whose nominee the  
appointee is

xvi E-mail ID of director

reliancecenterprise@rediffmail.com

xvii In case of cessation

Hereby confirmed that the above mentioned ☒ Director ☐ Managing director xviii is not associated with the company

with effect from

16/07/2018

(DD/MM/YYYY) xix due to

Resignation u/s 168

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)

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                        | <input type="text"/>              | <input type="button" value="Pre-fill"/>       |
|   | ii Income Tax permanent account number (PAN)                          | <input type="text"/>              | <input type="button" value="Verify Details"/> |
|   | iii <input type="radio"/> Appointment <input type="radio"/> Cessation |                                   |                                               |
|   | iv Membership number of the secretary                                 | <input type="text"/>              |                                               |
|   | v First Name                                                          | <input type="text"/>              |                                               |
|   | vi Middle Name                                                        | <input type="text"/>              |                                               |
|   | vii Last Name                                                         | <input type="text"/>              |                                               |
|   | viii <b>Father's name</b>                                             |                                   |                                               |
|   | ix First Name                                                         | <input type="text"/>              |                                               |
|   | x Middle Name                                                         | <input type="text"/>              |                                               |
|   | xi Last Name                                                          | <input type="text"/>              |                                               |
|   | xii Present residential address                                       | xiii Line I                       | <input type="text"/>                          |
|   |                                                                       | xiv Line II                       | <input type="text"/>                          |
|   | xv City                                                               | <input type="text"/>              |                                               |
|   | xvi State                                                             | xvii Pin Code                     | <input type="text"/>                          |
|   | xviii ISO Country Code                                                | <input type="text"/>              |                                               |
|   | xix Country                                                           | <input type="text"/>              |                                               |
|   | xx Phone                                                              | xxi Fax                           | <input type="text"/>                          |
|   | xxii Date of birth                                                    | <input type="text"/> (DD/MM/YYYY) |                                               |
|   | xxiii Designation                                                     | <input type="text"/>              |                                               |
|   | xxiv Date of Appointment or cessation                                 | <input type="text"/> (DD/MM/YYYY) |                                               |
|   | xxv E-mail ID                                                         | <input type="text"/>              |                                               |

**Attachments**

List of attachments

- (1) Declaration by first director
- (2) Declaration of the appointee director in Form No. DIR-2;
- (3) Notice of resignation;
- (4) Evidence of cessation;

Attach

Attach

Attach

Attach

Attach

Resignation Letter.pdf  
Board Resolution.pdf

Remove attachment

(6) Optional attachment(s) - if any.

### Declaration

I \* Nikita Hemendra Mapara

☐ A person named in the articles as a \_\_\_\_\_ of the company

(in case if a new company) or

☒ authorized by the Board of Directors of the Company vide \_\_\_\_\_  
number dated 16/07/2018

to sign this form and declare that all the requirements of Companies Act, 2013 and the rules made thereunder in respect of the subject matter of this form and matters incidental thereto have been complied with. I also declare that all the information given herein above is true, correct and complete including the attachments to this form and nothing material has been suppressed.

\* To be digitally signed by

NIKITA H  
MAPARA

\* 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

06736537

### 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 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. I further certify that:

- ☐ The said records have been properly prepared, signed by the required officers of the Company and maintained as per the relevant provisions of the Companies Act, 2013 and were found to be in order ;
- ☐ All the required attachments have been completely and legibly attached to this form;
- ☐ It is understood that I shall be liable for action under Section 448 of The Companies Act, 2013 for wrong certification, if any found at any stage.

\* To be digitally signed by

- ☐ Chartered accountant (in whole-time practice) or ☐ Cost accountant (in whole-time practice) or
- ☐ Company secretary (in whole-time practice)

\* Whether Associate or fellow ☐ Associate ☐ Fellow

Membership number

Certificate of Practice Number

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.

DIS MINISTRY  
OF  
CORPORATE  
AFFAIRS 23