

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

SRN : M07341704

Service Request Date : 03/06/2018

Payment made into : State Bank of India

Received From :

Name : PRITI AGARWAL
Address : 24 N.S.Road
4th Floor
Kolkata , West Bengal
India - 700001

Entity on whose behalf money is paid

LLPIN: AAE-3783
Name : SOVA REAL ESTATE LLP
Address : Village- Sahapur, Post Office- Kolaghat,

Purba Mednipur , West Bengal
India - 721134

Full Particulars of Remittance

Service Type: eFiling

Service Description	Type of Fee	Amount(Rs.)
Fee for LLP Form 11 for the year ending on 2018	Normal	100.00
	Additional	400.00
	Total	500.00

Mode of Payment: Internet Banking - State Bank of India

Received Payment Rupees: Five 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 36 of the LLP Rules, 2009).

LLP FORM NO. 11

[Pursuant to rule 25(1) of Limited Liability Partnership Rules, 2009]

Annual Return of Limited Liability Partnership (LLP)

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

1.(a) *Annual return made upto 31st day of March of	<input type="text" value="2018"/>	Year	
(b) *Start date of financial year for which annual return is being filed	<input type="text" value="01/04/2017"/>	(DD/MM/YYYY)	
2. *Limited Liability Partnership identification number (LLPIN)	<input type="text" value="AAE-3783"/>	<input type="button" value="Pre-fill"/>	
3. Name of the Limited Liability Partnership (LLP)	<input type="text" value="SOVA REAL ESTATE LLP"/>		
4. (a) Address of the registered office of the LLP	<input type="text" value="Village- Sahapur, Post Office- Kolaghat, Purba Mednipur, Midnapore, West Bengal, 721134, India"/>		
(b) * e-mail ID	<input type="text" value="dkbera4@gmail.com"/>		
5. Other address if declared under section 13(2) for service of documents	<input type="text" value="Village- Sahapur, Post Office- Kolaghat, Purba Mednipur, Midnapore, West Bengal, 721134, India"/>		
6. *Business Classification	<input type="text" value="Business"/>		
7. Principal business activities of the LLP	<input type="text" value="Building constructions on land and sale to buyers for residential and commercial purposes, development of market complex"/>		
8. Details as on 31st March of the period for which annual return is being filed			
(a). Total number of designated partners	<input type="text" value="2"/>	(b). Total number of partners	<input type="text" value="1"/>
(c). Total obligation of contribution of partners of the LLP (in Rs.)	<input type="text" value="10,00,000"/>		
(d). *Total contribution received by all partners of the LLP (in Rs.)	<input type="text" value="3,00,000"/>		

Note: 'Contribution received' to be entered in corresponding Form 8 should be same as the value entered in field 8(d) above.

9. Service request number (SRN) of the partners' details validated through the screen (if applicable)	<input type="text"/>
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10. Details of individual(s) as partners

1

Designation	Partner	Pre-Fill
Designated Partner Identification number (DPIN)/ Income tax permanent account number (Income-tax PAN)/ Passport number	BHFPB8553A	
Name	ARINDAM BERA	
Father's Name	DHANANJOY KUMAR BERA	
Permanent Residential Address	VILLAGE- SAHAPUR, POST OFFICE- KOLAGHAT PASHKURA - II PURBA MEDNIPUR West Bengal 721134	
Present residential address	VILLAGE- SAHAPUR, POST OFFICE- KOLAGHAT PASHKURA - II PURBA MEDNIPUR West Bengal 721134	
Nationality	INDIA	Date of Appointment 14/07/2015 (DD/MM/YYYY)
Date of Cessation		(DD/MM/YYYY)
Date of change in designation		(DD/MM/YYYY)
Previous Designation		
Previous Name, if any		
Obligation of contribution(in Rs.)	3,33,334	Contribution received and accounted for (in Rs.) 1,33,000
*Whether resident in India	<input checked="" type="radio"/> Yes <input type="radio"/> No	
Number of limited liability partnership(s) in which he/she is a partner	1	
Number of Company(s) in which he/she is a director	0	

Designation

Designated Partner

Pre-Fill

Designated Partner Identification number (DPIN)/ Income tax permanent account number (Income-tax PAN)/ Passport number

07390454

Name

DEBASMITA CHATTARAJ BERA

Father's Name

DHANANJOY KUMAR BERA

Permanent Residential Address

58/23 PRINCE ANWAR SHAH ROAD
LAKE GARDENS LAKE
KOLKATA
West Bengal
700045

Present residential address

58/23 PRINCE ANWAR SHAH ROAD
LAKE GARDENS LAKE
KOLKATA
West Bengal
700045

Nationality

INDIA

Date of Appointment

29/12/2015

(DD/MM/YYYY)

Date of Cessation

(DD/MM/YYYY)

Date of change in designation

(DD/MM/YYYY)

Previous Designation

Previous Name, if any

Obligation of contribution(in Rs.)

34,000

Contribution received and accounted for (in Rs.)

34,000

*Whether resident in India

 Yes No

Number of limited liability partnership(s) in which he/she is a partner

1

Number of Company(s) in which he/she is a director

0

Designation

Designated Partner

Pre-Fill

Designated Partner Identification number (DPIN)/ Income tax permanent account number (Income-tax PAN)/ Passport number

07213014

Name

DHANANJOY KUMAR BERA

Father's Name

SITARAM BERA

Permanent Residential Address

VILLAGE- SAHAPUR, POST OFFICE- KOLAGHAT,
PASHKURA-II
PURBA MEDNIPUR
West Bengal
721134

Present residential address

VILLAGE- SAHAPUR, POST OFFICE- KOLAGHAT,
PASHKURA-II
PURBA MEDNIPUR
West Bengal
721134

Nationality

INDIA

Date of Appointment

14/07/2015

(DD/MM/YYYY)

Date of Cessation

(DD/MM/YYYY)

Date of change in designation

(DD/MM/YYYY)

Previous Designation

Previous Name, if any

Obligation of contribution(in Rs.)

3,33,333

Contribution received and accounted for (in Rs.)

1,33,000

*Whether resident in India

 Yes No

Number of limited liability partnership(s) in which he/she is a partner

1

Number of Company(s) in which he/she is a director

0

1

Type of body corporate

Pre-Fill

Corporate identity number (CIN) or Foreign company registration number (FCRN) or Limited liability partnership identification number (LLPIN) or Foreign limited liability partnership identification number (FLLPIN) or any other identification number

Name of the body corporate

Full address of the registered office or principal place of business in India

Country where registered

Obligation of contribution

(in Rs.)

Contribution received and accounted for

(in Rs.)

Name and particulars of person signing on behalf of body corporate as nominee

Category

DPIN/ Income-tax PAN/ Passport number

Name

Father's Name

Permanent Residential Address

Present residential address

Nationality

Date of Appointment

(DD/MM/YYYY)

Date of Cessation

(DD/MM/YYYY)

Date of change in designation

(DD/MM/YYYY)

Previous Designation

Previous Name, if any

*Whether resident in India Yes No

Number of limited liability partnership(s) in which he/she is a partner

Number of Company(s) in which he/she is a director

Note: Provide the detail of the LLPs (LLPIN and name of LLP) and companies (CIN, DIN and name of company) as an attachment.

12. Summary of designated partner(s)/partner(s) as on 31st March of the period for which annual return is being filed

S.No.	Category	Number of Partners	Number of Designated Partners		Total
			Resident in India	Others	
(i)	Individuals	1	1	1	3
(ii)	LLPs	0	0	0	0
(iii)	Companies	0	0	0	0
(iv)	Foreign LLPs	0	0	0	0
(v)	Foreign Companies	0	0	0	0
(vi)	LLPs incorporated outside India	0	0	0	0
(vii)	Companies incorporated outside India/ Companies registered in Sikkim	0	0	0	0
	Total	1	1	1	3

13. Particulars of penalties imposed on the :

(i) Limited liability partnership

Number of rows required

Section Number	Offence	Penalty Imposed
1		

(ii) Partners / Designated partners

Number of rows required

DPIN/ Income-tax PAN/ Passport number	Name of Partner / Designated Partner	Name of Nominee in case of Body Corporate	Section Number	Offence	Penalty Imposed
1					

14. Particulars of compounding offences

Number of rows required

Section Number	Offence	Date of Compounding of offence
1		

15. *Whether turnover of the LLP exceeds 5 crores

Yes

No

Note: Attach the details of company(s)/ LLP(s) in which partner/ designated partner is a director/ partner, as the case may be in the below format as an attachment

S.No.	CIN/ LLPIN	Name of Company/ LLP

Attachments

- 1. Details of LLP and/ or company in which partner/ designated partner is a director/ partner
- 2. Optional attachment(s) - if any

Attach

Attach

List of attachments

SRE Partners Capital-page-001.p

Remove attachment

Verification

* To the best of my knowledge and belief, the information given in this form and its attachment is correct and complete.

To be digitally signed by Designated partner

DEBASMI
TA
CHATTAR
AJ BERA

*DPIN of the designated partner

07390454

Certificate

I certify that Annual Return contains true and correct information.

To be digitally signed by Designated partner

DPIN of the designated partner

OR

It is hereby certified that I have verified the above particulars (including attachment(s)) from the records of

SOVA REAL ESTATE LLP

and found them to be true and correct. I further certify that all the required attachment(s) have been completely attached to this form.

Company Secretary in practice

Priti Agarwal
Digitally signed by Priti Agarwal
Date: 2018.06.02 11:04:49 +05'30'

Certificate of Practice Number

9937

Whether associate or fellow

Associate Fellow

Modify

Check Form

Prescrutiny

This eForm has been taken on file maintained by the registrar through electronic mode and on the basis of statement of correctness given by the filing LLP.