



John Oakey And Mohan Limited

MOHAN NAGAR, GHAZIABAD-201007 (U.P.) INDIA

Tel. : 0120-2657298, Fax : 0120-2659155

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CIN : L15549DL1962PLC003726

GST No. : 09AAACJ1608A2Z6

AN ISO 9001 : 2000 COMPANY

Oakey's

NOTICE TO ALL STAKEHOLDERS

ALL PUBLIC AND STAKEHOLDERS ARE HEREBY INFORMED THAT

WITH EFFECT FROM 01.04.2019, THE REGISTERED OFFICE OF THE COMPANY HAS BEEN SHIFTED FROM:

FLAT NO 508 SETHI BHAWAN
RAJENDRA PLACE NEW DELHI 110008

TO

OFFICE NO 4 FIRST FLOOR, CSC
POCKET E MARKET MAYUR VIHAR PHASE 2
DELHI 110091

FOR JOHN OAKEY AND MOHAN LTD


SURENDRA KUMAR SETH

COMPANY SECRETARY

Oakey's Abrasive : A Great start for a fine finish

Registered Office : Flat No. 508, Sethi Bhawan, Rajendra Place, New Delhi-110008

Regd. Office:
Off. No-4, FF CSC, Pocket-E Market,
Mayur Vihar, Phase-2, Delhi-110091

FORM NO. INC-22

[Pursuant to section 12(2) & (4) of The Companies Act, 2013 and Rule 25 and 27 of The Companies(Incorporation) Rules, 2014]



Notice of situation or change
of situation of registered
office

Form language English Hindi

Refer the instruction kit for filling the form.

1. This Form is for New company Existing company

2. (a) Corporate identity number (CIN) of company

(b) Global location number (GLN) of company

3. (a) Name of the company

(b) Address of the registered office of the company

(c) Name of office of existing Registrar of Companies (RoC)

(d) Purpose of the form Change within local limits of city, town or village
 Change outside local limits of city, town or village, within the same RoC and state
 Change in RoC within the same state
 Change in state within the jurisdiction of same RoC
 Change in state outside the jurisdiction of existing RoC

4. Notice is hereby given that

(a) The address of the registered office of the company is situated with effect from

(DD/MM/YYYY) at

the date of incorporation of company is

Address Line I

Line II

City

District

State/Union Territory

Country

Pin Code

email ID

(b) Registered Office is

Owned by Company Owned by Director (Not taken on lease by company)

Taken on Lease by company Owned by any other entity/Person (Not taken on lease by company)

(c) Name of office of Proposed RoC or new RoC

(d) The full address of the police station under whose jurisdiction the registered office of the company is situated

Name

Address Line I

Address Line II

City

State/Union Territory

Pincode

(e) Particulars of the Utility Services Bill depicting the address of the registered office
(not older than two months)

Attachments

- (1) Proof of Registered Office address (Conveyance/Lease deed/Rent Agreement etc. along with the rent receipts)
- (2) Copies of the utility bills as mentioned above (not older than two months)
- (4) A proof that the Company is permitted to use the address as the registered office of the Company if the same is owned by any other entity/ Person (not taken on lease by company)
- (6) List of all the companies (specifying their CIN) having the same registered office address, if any
- (7) Optional attachment, if any

Attach

Attach

Attach

Attach

Attach

List of attachments

rent agreement ro.pdf

electric bill.pdf

noc3.pdf

NAME OF COMPANY.pdf

Remove attachment

Declaration

I

- A person named in the articles as a of the company
- have been authorized by the Board of Directors of the company vide resolution number dated to sign this form and declare that
- all the requirements of The 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.
- It is hereby further certified that a having Membership number and certificate of practice no certifying this form has been duly engaged for this purpose.

To be digitally signed by Digitally signed by SATISH MOHAN Date: 2019.04.03 17:01:21 +05'30'

Designation

DIN 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. 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 records maintained by the company 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 :

- 1. 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;
- 2. All the required attachments have been completely and legibly attached to this form;
- 3. I further declare that I have personally visited the registered office given in the form at the address mentioned herein above and verified that the said registered office of the company is functioning for the business purposes of the company.

To be digitally signed by Digitally signed by ASHUTOSH KUMAR PANDEY Date: 2019.04.03 17:18:56 +05'30'

Category

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

Whether Associate Fellow

Membership number

Certificate of Practice number

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

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

SRN : H49552755

Service Request Date : 03/04/2019

Payment made into : ICICI Bank

Received From :**Name :** Ashutosh Kumar Pandey**Address :** B-326

2nd Floor, G D Colony M V Phase-III

Delhi, Delhi

India - 110096

Entity on whose behalf money is paid**CIN:** L15549DL1962PLC003726**Name :** JOHN OAKY AND MOHAN LIMITED**Address :** OFFICE NO-4,FF,CSC POCKET E MARKET,

MAYUR VIHAR PHASE-II

DELHI, Delhi

India - 110091

Full Particulars of Remittance

Service Type: eFiling

Service Description	Type of Fee	Amount(Rs.)
Fee For Form INC-22	Normal	600.00
	Total	600.00

Mode of Payment: Credit Card- ICICI 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)