FORM 20B [Refer section 159 of the Companies Act, 1956]

Form for filing annual return by a company having a share capital with the Registrar

Note - All fields marked in * are to be mandatorily filled.
Authorised capital of the company as on the date of filling (in Rs.)
1(a) *Corporate identity number (CIN) of company
(b) Global location number (GLN) of company
2(a) Name of the company
(b) *Address of the Line I registered office of the company Line II
* City
* State
Country
* Pin code
(c) Telephone number with STD code (d) Fax
(e) * e-mail ID of the company
(f) Website
3. * Whether shares listed on recognised stock exchange O Yes O No
If yes, stock exchange code: A B
4. * Financial year end date to which the annual general meeting (AGM) relates [DD/MM/YYYY]
5. * Whether annual general meeting (AGM) held O Yes O No
(a) If yes, date of AGM (DD/MM/YYYY)
(b) * Due date of AGM (DD/MM/YYY)
(c) * Whether any extension for financial year or AGM granted O Yes O No
(d) If yes, due date of AGM after grant of extension (DD/MM/YYYY)
I. Capital Structure of the company as on the date of AGM or latest due date thereof
6. * Authorised capital of the company (in Rs.)
Break up of Authorised capital
* Number of equity shares Total amount of equity shares (in Rs.)
Nominal amount per equity share
*Number of preference shares Total amount of preference shares (in Rs.)
Nominal amount per preference
Number of unclassified shares Total amount of unclassified shares (in Rs.)

7.* Issued capital of the company	(in Rs.)		
Break up of Issued capital			
*Number of equity shares		Total amount of equity shares (in Rs.)	
Nominal amount per equity share			
*Number of preference shares		Total amount of preference shares (in Rs.)	
Nominal amount per preference share		(1110)	
8. * Subscribed capital of the compan	y (in Rs.)		
Break up of Subscribed capital			
*Number of equity shares		Total amount of equity shares (in Rs.)	
Nominal amount per equity share			
*Number of preference shares		Total amount of preference shares (in Rs.)	
Nominal amount per preference share			
9. * Paid up capital of the company	(in Rs.)		
Break up of Paid up capital			
* Number of equity shares		Total amount of equity shares (in Rs.)	
Nominal amount per equity share			
* Number of preference shares] Total amount of preference shares (in Rs.)	
Nominal amount per preference share			
10. * Total debentures of the company	(in Rs.)		
Break up of Debenture			
* Number of non convertible debentures		Total amount of non convertible debentures (in Rs.)	
Nominal amount per non convertible debenture			
* Number of partly convertible debentures		Total amount of partly convertible debentures (in Rs.)	
Nominal amount per partly convertible debenture			
* Number of fully convertible debentures		Total amount of fully convertible debentures (in Rs.)	
Nominal amount per fully convertible debenture			

II. Indebtness of the company as on the date of AGM or latest due date thereof (secured loans including interest outstanding and accrued but not due for payment)

11.* Amount

(in Rs.)

III. Equity share breakup (percentage of total equity) as on the date of AGM or latest due date thereof

S.No.	Category	Percentage
1.	Government [Central and State]	
2.	Government companies	
3.	Public financial companies	
4.	Nationalised or other banks	
5.	Mutual funds	
6.	Venture capital	
7.	Foreign holdings (Foreign institutional investor(s), Foreign companie(s) Foreign financial institution(s), Non-resident indian(s) or Overseas corporate bodies or Others)	
8.	Bodies corporate (not mentioned above)	
9.	Directors or relatives of directors	
10.	Other top fifty (50) shareholders (other than listed above)	
11.	Others	
12.	Total	

* Total number of shareholders

IV. Details of directors(s), Managing Director, manager and secretary as on the date of AGM

12.* Number of director(s), Managing Director, manager and secretary

Following details are to be entered only in case date of AGM is on or after 1st July'2007

Provide Director identification number (DIN) in case of director, Managing Director and Income-tax permanent account number (Income-tax PAN) in case of manager, secretary

DIN or Income-tax PAN	
Name	
Designation	Date of appointment
Number of equity share(s) held	per cent
Whether he/she has signed the annual return O Yes	s 🔿 No
If yes, date of signing	(DD/MM/YYYY)
DIN or Income-tax PAN	
Name	
Designation	Date of appointment
Number of equity share(s) held	per cent
Whether he/she has signed the annual return O Yes	s 🔿 No
If yes, date of signing	(DD/MM/YYYY)

DIN or Income-tax PAN Name	
Designation	Date of appointment
Number of equity share(s) held	per cent
Whether he/she has signed the annual return O Yes	○ No
If yes, date of signing	(DD/MM/YYYY)
DIN or Income-tax PAN	
Designation	Date of appointment
Number of equity share(s) held	per cent
Whether he/she has signed the annual return O Yes	○ No
If yes, date of signing	(DD/MM/YYYY)
DIN or Income-tax PAN	
Designation	Date of appointment
Number of equity share(s) held	per cent
Whether he/she has signed the annual return O Yes	○ No
If yes, date of signing	(DD/MM/YYYY)
DIN or Income-tax PAN	
Designation	Date of appointment
Number of equity share(s) held	per cent
Whether he/she has signed the annual return Yes	○ No
If yes, date of signing	(DD/MM/YYYY)

V. Details of director(s), Managing Director, manager and secretary who ceased to be associated with the company since the date of last AGM

13. *Number of director(s), Managing Director, manager and secretary

Following details are to be entered only in case date of AGM is on or after 1st July'2007

Provide DIN in case of director, Managing Director and income-tax PAN in case of manager, secretary

DIN or Income-tax PAN		
Name		
Designation		
Date of appointment	Date of cessation	

DIN or Income-tax PAN		
Name		
Designation		
Date of appointment	Date of cessation	

DIN or Income-tax PAN		
Name		
Designation		
Date of appointment	Date of cessation	

DIN or Income-tax PAN		
Name		
Designation		
Date of appointment	Date of cessation	n

14. In case of a listed company, details of secretary in whole time practice certifying the annual return

Name				
Whether associate or fellow	○ Associate	◯ Fellow		
Certificate of practice number				
15. * Whether complete list of s In case No, then submit the seperately with the office of	e details of all the sh	nare holders, debentu		◯ Yes ◯ No
Attachments			List of attach	ments
1. * Annual return as per sche Companies Act, 1956	dule V of the			
2. Approval letter for extension or annual general meeting	,			

3. Optional attachment(s) - if any

Verification

I confirm that all the particulars mentioned above are true as per the attached annual return which is duly prepared as required under section 159 and Schedule V and which is duly signed as required under section 161 of the Act. To the best of my knowledge and belief, the information given in this form and its attachments is correct and complete.

I have been authorised by the Board of directors' resolution number to sign and submit this form.	;r *	dated *		(DD/MM/YYYY)
To be digitally signed by				
Managing Director or director or manager or secretary of the company				
* Designation				
* DIN of the director or Managing Director; or Income-tax PAN of the manager; or Membership number, if applicable or income-tax PAN of the secretary (secretary of a company who is not a member of ICSI, may quote his/ her income-tax PAN)				
Certificate				
It is hereby certified that I have verified the above particulars (inclu-	uding attachment(s)) from	the records of	

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

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

* Whether associate or fellow	○ Associate
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*	Membership	o number	or	certificate	of	practice	number

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

◯ Fellow