| NEW-VENDOR   | REGISTRATION / EXISTIN             | G-VENDOR REGIS       | TRATION CHANGE FORM   | A                 |
|--|------------------------------------|----------------------|-----------------------|-------------------|
| Section 1: Company Details and Genera  | I Information                      |                      |                       |                   |
| 1. Name of Company: OM Sales   | corporation                        |                      |                       |                   |
| A. M   | 1                                  |                      |                       |                   |
| If existing Vendor, metion old name here:-  2. Address:- Butterd tarum K City:- Gurgan | Esterent , 1315/2                  | 8/3 -66 b            | med been in           | to Allhi Cunganon |
| City Cuna con  | State: 1.1.                        |                      | Country A             | 13                |
| PIN:- 12001  | State.                             |                      | Oddritry.             |                   |
| 3. Contact Name:- Paw au   |                                    |                      | 4, Contact NO:- 90    | 6883688           |
| o. Gollago   |                                    |                      | •                     | _                 |
| 5. Email:  |                                    | 0                    | 6. Payment Terms: 1   | week after iner   |
| 7. Parent Company (Full legal name)  | M Sales confora                    | um                   |                       |                   |
| 8. Type of Business (mark one only)  |                                    |                      |                       |                   |
| Corporate Limited  | Partnership:                       | 1                    | Other (specify):      |                   |
| 9.Goods / Services Availed by Vendor   |                                    |                      |                       |                   |
| Fixed Asset  | Repair & maintenance work          |                      | Consumables           |                   |
|  | Trepair & maintenance work         |                      | Consumation           | 1                 |
| General Items/Office Exp (specify)   |                                    |                      | Professional Services |                   |
| Section 2: Financial Information * (Pleas  | e attach a certified copy)         | 8                    |                       |                   |
| 1. Incorporation Detail  | prouded                            |                      |                       |                   |
| Incorporation Number   | 100                                |                      |                       |                   |
| Incorporation Date   |                                    |                      |                       |                   |
| 2. Income Tax Detail   |                                    |                      |                       |                   |
| PAN Number   | B F06320N                          |                      |                       |                   |
|  | 7 17                               |                      |                       |                   |
| i.GST Registration Number 0 6  | AABF06320N1                        | 27                   |                       |                   |
| ii.GST Registration Date   |                                    |                      |                       |                   |
| iii.GST Registration Type  |                                    |                      |                       |                   |
|  | position                           | Consumer             | Unregistered          |                   |
| iv.Retrun Filing Period  |                                    |                      |                       |                   |
|  | Quarterly                          |                      |                       |                   |
| v.Last GST Return  | ,                                  |                      |                       |                   |
| 4. MSME Detail   | ·a                                 |                      |                       |                   |
|  | YAM- HR . 05-                      | 0016004              |                       |                   |
| MSME Registration Date   |                                    |                      |                       |                   |
| If not register in MSME then letter of r   | on registered                      |                      |                       |                   |
| 5. Bank Detail   |                                    |                      |                       |                   |
| Bank Name (avana   | Bank                               |                      |                       |                   |
|  | 257000024                          |                      |                       |                   |
| Bank IFSC Code C N 6   | 280001723                          |                      |                       |                   |
| Section 3: Other   |                                    |                      |                       |                   |
| Please list any current legal disputes   | in which your company may be       | e involved.          |                       |                   |
| YES 🗍  | NO                                 |                      |                       |                   |
| if Yes please specify  | 110                                |                      |                       |                   |
|  |                                    |                      |                       |                   |
| Certification:  I, the undersigned, warrant that t                                     | he information provided in this fo | um is correct and in | the                   |                   |
| event of changes details will be p   | •                                  | onnia conect, and m  | n IC                  |                   |
| event of changes details will be p   | novided as soon as possible.       |                      |                       |                   |
| Name:  |                                    | Designation          |                       |                   |
| TVAITIE.   |                                    | Designation          |                       | 1                 |
| Signature:   |                                    | Date:                | 2                     |                   |
| ALDS Electric India D. 4 Ltd   |                                    |                      |                       |                   |
| ALPS Electric India Pvt. Ltd<br>Checked by PIC   | Approved by HOD                    |                      | Approved by           | accounts          |
|  | 1 1 1                              |                      | , ipploted by         | 1                 |
| Sign: - Vchar  | Sign: - \\ \\\                     |                      | Sign:                 | NM                |
| 0 1  | Main - I                           |                      | Oigi.                 |                   |
| Name: - Predee Sharma  | Name: Viero Me                     | lik                  | Name:-                |                   |
| 75-74-HE200-10-4   | 04.053WA755.0 <del>5</del>         |                      |                       |                   |
| Date: - 29 4 22  | Date:- 21) 4/24                    |                      | Date:-/               | 5                 |
|  | _141                               |                      |                       | IDACC15-F01B      |
|  |                                    |                      |                       | IDACO IS I O ID   |



# Government of India Form GST REG-06

[See Rule 10(1)]

## Registration Certificate

### Registration Number:06AABFO6320N1Z7

| 1                      | Legal Name   |           | OM SALES CORPORATION   |            |    |     |
|------------------------|--|-----------|--|------------|----|-----|
| 2.                     | Trade Name, if any Constitution of Business Address of Principal Place of Business |           | OM SALES CORPORATION  Partnership  behind Karim Restaurant, 2315/28/3, opp payal cinema, Old Delhi Gurgaon Road, Rajiv Nagar, Gurgaon, Haryana, 122001 |            |    |     |
| 3.                     |  |           |  |            |    |     |
| 4.                     |  |           |  |            |    |     |
| 5.                     | Date of Liability  |           | 01/07/2017   |            |    |     |
| б.                     | Period of Validity   |           | From   | 01/07/2017 | То | NA  |
| <b>7</b> <sub>+:</sub> | Type of Registration   |           | Regular  |            |    |     |
| -                      | Particulars of Approving Authority   |           |  |            |    |     |
| 8.                     | Particulars of Approving   | Authority |  |            |    | )   |
| 8.<br>Signa            |  | Authority |  |            |    | 3   |
|                        |  | Authority |  | :          |    | Sy. |
|                        |  | Authority |  | 3          |    | y   |
|                        |  | Authority |  | 5          |    | , y |
|                        | ture   | Authority |  | 3          |    | y   |
| Signa                  | ture   | Authority |  | 5          |    | Ŋ   |
| Signa<br>Namo<br>Desig | ture   | Authority |  | 3          |    | ·v  |

This is a system generated digitally signed Registration Certificate issued based on the deemed approval of the application for registration





**GSTIN** 

06AABFO6320N1Z7

Legal Name

OM SALES CORPORATION

Trade Name, if any

OM SALES CORPORATION

### **Details of Additional Places of Business**

Total Number of Additional Places of Business in the State

0



|          | Goods  | Services |
|----------|--|----------|
| 44160010 | CASKS, BARRELS, VATS, TUBS AND OTHER COOPERS PRODUCTS AND PARTS THEREOF, OF WOOD, INCLUDING STAVES - CASKS, BARRELS, VATS, TUBS AND OTHER COOPERS PRODUCTS AND PARTS THEREOF, OF WOOD, INCLUDING STAVES: CASKS, BARRELS, VATS AND TUBS |          |
| 09011111 | COFFEE, WHETHER OR NOT ROASTED OR DACAFFEINATED; COFFEE HUSKS AND SKINS; COFFEE SUBSTITUTES CONTAINING COFFEE IN ANY PROPORTION Coffee, not roasted: Not decaffeinated: Arabica plantation: A Grade                                    |          |

**HSN:** Harmonized System of Nomenclature of Goods and Services

SHOW FILING TABLE

Search Result based on GSTIN/UIN: 06AABFO6320N1Z7

# Filing details for GSTR3B

| Financial Year | Tax Period | Date of filing | Status |
|----------------|------------|----------------|--------|
| 2021-2022      | March      | 19/04/2022     | Filed  |
| 2021-2022      | February   | 19/03/2022     | Filed  |
| 2021-2022      | January    | 19/02/2022     | Filed  |
| 2021-2022      | December   | 20/01/2022     | Filed  |
| 2021-2022      | November   | 20/12/2021     | Filed  |
| 2021-2022      | October    | 18/11/2021     | Filed  |
| 2021-2022      | September  | 19/10/2021     | Filed  |
| 2021-2022      | August     | 20/09/2021     | Filed  |
| 2021-2022      | July       | 20/08/2021     | Filed  |
| 2021-2022      | June       | 20/07/2021     | Filed  |

Print: Udyam Registration Certificate



| DATE OF INCORPORATION /    |   |
|----------------------------|---|
| DATE OF INCOMI GRATION     |   |
| REGISTRATION OF ENTERPRISE | ā |

#### 26/05/2007

Email:

riteshkothari1@gmail.com

# DATE OF COMMENCEMENT OF PRODUCTION/BUSINESS

#### 26/05/2007

| NATIONAL IND   | USTRY   |
|----------------|---------|
| CLASSIFICATION | CODE(S) |
|                |         |

| SNo. | NIC 2 Digit  | NIC 4 Digit  | NIC 5 Digit  | Activity |
|------|--|--|--|----------|
| 1    | 46 - Wholesale trade, except of motor vehicles and motorcycles | 4630 - Wholesale of food, beverages and tobacco                                    | 46305 - Wholesale of edible oils, fats, sugar and processed/manufactured spices etc.       | Trading  |
| 2    | 46 - Wholesale trade, except of motor vehicles and motorcycles | 4630 - Wholesale of food, beverages and tobacco                                    | 46306 - Wholesale of tea, coffee & cocoa   | Trading  |
| 3    | 46 - Wholesale trade, except of motor vehicles and motorcycles | 4690 - Non-specialized wholesale trade   | 46909 - Other non-specialised wholesale trade n.e.c.                                       | Trading  |
| 4    | 77 - Rental and leasing activities                             | 7730 - Renting and leasing of other machinery, equipment and tangible goods n.e.c. | 77304 - Renting and operational leasing of office machinery and equipment without operator | Services |

### DATE OF UDYAM REGISTRATION

### 24/03/2021

Mobile

9958200415

In case of graduation (upward/reverse) of status of an enterprise, the benefit of the Government Schemes will be availed as per the provisions of Notification No. S.O. 2119(E) dated 26.06.2020 issued by the M/o MSME.

आयकर विमाग INCOME TAX DEPARTMENT



मारत सरकार GOVT OF INDIA

OM SALES CORPORATION

26/05/2007 Permanent Account Number AABFO6320N



24072014



| केनरा बैंक Canara Bank Gurgaon Main Branch Gurgaon Haryana 122001 IFSC: CNRB0001723 | Valid for three months only from the date of instrument  MULTI-CITY OD  D D M M Y Y Y Y |
|---|---|
| Pay   | या धारक को Or Bearer  |
| Rupees रूपये  | 41/   |
|   | ्र अदा करें ₹   |
| A/c. No. 1723257000024  | For OM SALES CORPORATION  |
| Payable at par at all our branches in India   | Authorised signatory Please sign above  |
| #*375156# 110015107#  | 000150# 30  |



### **Sub-Regional Office**

C-11 Regd. with a.d.

2/9/2019

Dated:

EMPLOYEES' STATE INSURANCE CORPORATION
Plot No. 47, Sector - 34, Gurgaon (Haryana) -122001

To M/s.OM SALES CORPORATION

Behind Karim Restaurant,2315/28/3 Opp Payal Cinema, Old Delhi Gurgaon Rajiv Nagar,122001

Subject:- Implementation of the E.S.I. Act, 1948 and Registration of Employees of the Factories and Establishments under Section 1(5) of the Act, as amended.

Dear Sir(s).

- 1. It is informed that under section 1(3) of the esi. act, 1948 is applicable to all factories/establishments covered under the act within the area where your factory/establishment is situated
- 2. It is further informed that the appropriate government has extended the provisions of the act to other establishments under section 1(5) of the act in this area
- **3**. Under section 2 a of the act such a factory/establishment is required to register itself under the act and chapter iv thereof casts a responsibility on the principal employer thereof to get his employees registered and pay contributions in respect of these employees covered under the act.
- **4**. On the basis of the particulars in respect of your factory/establishment submitted by you, the report of the inspection conducted by the Social Security Officer, who inspected your establishment on -NA-, your establishment falls within the purview of Section 1(5) of the Act with effect from 01-08-2019. In case, however, subsequent facts reveal that your establishment was coverable from a date prior to the date mentioned above, you shall make yourself liable to comply with the provisions of the Act from such earlier date.
- **5**. It is requested to take immediate steps for registration of your employees by submitting declaration forms online, payment of contribution, maintenance of records etc. from the date of coverage of your factory/establishment under the act. \*\*You are also requested to submit employer's registration form (form 01) as required under the provisions of sec.2-a of the esi act , 1948 read with regulation 10-b of the esi(general), regulations, 1950.
- 6. For the sake of convenience your establishment has been allotted code No 69000648210000999 which may kindly be used in all communications sent to this office and on all forms at the place indicated for the purpose. The Branch Office of the Corporation situated at Branch Office Civil Lines 421/7/16, Gurgaon has been instructed to render necessary assistance to you in connection with registration of your employees. In case you find any difficulty or for any other purpose which may be necessary in connection with the Scheme you are requested to contact the Manager of the above Branch Office who will render necessary help in the matter.
- **7.** A State wise list of ESI Dispensaries is available on our website <u>www.esic.nic.in</u> under the link Directories which can be downloaded. It is requested that publicity may be given about the Employees' State Insurance Dispensaries to enable your employees to choose their E.S.I. Dispensaries