



Impex Ferro Tech Limited

CIN No. : L27101WB1995PLC071996

Corporate & Communication Office:
SKP HOUSE
132A, S.P. Mukherjee Road, Kolkata - 700 026
Telephone : +91 33 4016 8000/8100
Fax : +91 33 4016 8107
E-mail : info@impexferrotech.com
Web : www.impexferrotech.com

Works :
Kadavita Dendua Road, P.O. Kalyaneshwari,
P.S. Kulti, Dist. : Burdwan, Pin - 713 369
West Bengal
Ph : (0341) 2522 248 (3 lines)
Fax : (0341) 2522 961

21st May, 2015

To
The Listing Department
National Stock Exchange of India Limited
Exchange Plaza
Bandra-Kurla Complex
Mumbai - 400 051

Script Symbol - IMPEXFERRO
Sub: Cessation of Independent director due to death.

Dear Sir/Madam,

This is sad to inform you about the cessation of office of Mr. Santosh Kumar Khandelwal, Independent Director due to the sad demise on 24.03.2015.

The Company has filed the requisite Form with ROC along with the Death Certificate, copy of which is attached herewith.

There is a delay in informing the same as the company has come to know about the same very recently.

This is for your information and records.

Thanking You,

Yours Faithfully,
For Impex Ferro Tech Limited

Richa Agarwal
Richa Agarwal
(Company Secretary)
(PAN: BASPA7091L)

MINISTRY OF CORPORATE AFFAIRS

RECEIPT

G.A.R.7

SRN : C53630976

Payment made into : Punjab National Bank

Service Request Date : 21/05/2015

Received From :

Name : ANANTA KUMAR PARIDA
Address : 4, CHOWRINGHEE LANE
DIAMOND CHAMBER
BLOCK - 1, 4TH FLOOR, SUITE # 4M
KOLKATA, WEST BENGAL
700016

Entity on whose behalf money is paid

CIN : L27101WB1995PLC071996
Name : IMPEX FERRO TECH LTD
Address : 35, C.R. AVENUE,
4TH FLOOR,
KOLKATA, WEST BENGAL
INDIA - 700012

Full Particulars of Remittance

Service Type: eFiling

Service Description	Type of Fee	Amount(Rs.)
Fee For Form DIR-12	Normal	600.00
	Additional	1,200.00
	Total	1,800.00

Mode of Payment: Internet Banking - Punjab National Bank

Received Payment Rupees: One Thousand Eight Hundred only

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Impex Ferro Tech Limited

Director

FORM DIR-12

[Pursuant to sections 7(1)(g), 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]



सत्यमेव जयते

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) *Form INC-1 reference number (Service request number (SRN) of Form INC-1) or Corporate identity number (CIN) of company

L27101WB1995PLC071996

(b) Global location number (GLN) of company

Pre-fill

3 (a) Name of the company

IMPEX FERRO TECH LTD

(b) Address of the registered office of the company

35, C.R. AVENUE,
4TH FLOOR,
KOLKATA
West Bengal
INDIA
700012

(c) e-mail ID of the company

secretarial@rohiferrrotech.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

| Details of the Managing Director or director of the company

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Impex Ferro Tech Limited

[Signature]

Director

Director identification number (DIN)	06607979	Pre-fill
Name	SANTOSH KUMAR KHANDELWAL	
Father's name	SATYA NARAYAN KHANDELWAL	
Present residential address	A-8/528, KALYANI NADIA WB IN 741235	
Nationality	IN	Date of birth 11/02/1948 Gender MALE
☐ Appointment ☒ Cessation ☐ Change in designation	Date of appointment or change in designation (DD/MM/YYYY)	
Designation	Director	
Category		
Whether Chairman, Executive director, Non-executive director		
☐ Chairman ☐ Executive director ☐ Non-executive director		
DIN of the director to whom the appointee is alternate		Pre-fill
Name of the director to whom the appointee is alternate		
Name of the company or institution whose nominee the appointee is		
e-mail ID of director	santoshsspl60@gmail.com	
In case of cessation		
Hereby confirmed that the above mentioned ☒ Director ☐ Managing Director is not associated with the company with effect from 24/03/2015 (DD/MM/YYYY) due to Death		
Interest in other entities		
Number of such entities		
CIN/LLPIN/FCRN/Registration number		Pre-fill
Name		
Address		
Nature of interest		
* Designation		
Percentage of Shareholding	Amount	
Others (specify)		

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Impex Ferro Tech Limited

Director

6. Number of manager(s), secretary(s), Chief Financial Officer, Chief Executive Officer for which the form is being filed

7. Details of manager(s), secretary(s), Chief Financial Officer, Chief Executive Officer of the company

Details of manager(s), secretary(s), Chief Financial Officer, Chief Executive Officer of the company	
Director identification Number (DIN), if any	
Income-Tax permanent account number (PAN)	
Membership number of the secretary	
First Name	
Middle Name	
Last Name	
Father's name	
First Name	
Middle Name	
Last Name	
Present residential address	Line I
	Line II
City	
State	
ISO Country Code	
Country	
Phone	
Fax	
Date of birth	(DD/MM/YYYY)
Designation	
Date of Appointment or cessation	(DD/MM/YYYY)
e-mail ID	

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Impex Ferro Tech Limited

[Signature]
Director

Attachments

List of attachments

(1) Letter of Appointment;

Attach

(2) Declaration by the first director

Attach

(3) Declaration of the appointee Director, in Form DIR-2;

Attach

(4) Notice of resignation;

Attach

(5) Evidence of Cessation;

Attach

(6) Interest in other entities.

Attach

(7) Optional attachment(s), if any

Attach

Death Certificate.pdf

Remove attachment

Declaration

I * SURESH KUMAR PATNI

☐ A person named in the articles as a _____ of the company.

☒ authorized by the Board of Directors of the Company vide resolution number _____ dated 30/05/2014 (DD/MM/YYYY)

* Designation Director

SURESH
KUMAR
PATNI
 * DIN of the director, or DIN or PAN of the manager
or CEO or CFO; or Membership number of the secretary

00032674

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:

i. 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;

ii. All the required attachments have been completely and legibly attached to this form;

* To be digitally signed by

LOHIA
PRIYANKA

☐ 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

7893

* Certificate of Practice Number

8843

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.

CERTIFIED TRUE COPY

Impex Ferro Tech Limited

Director

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Impex Ferro Tech Limited



Director

राष्ट्रीय जनसंख्या आँकड़ा संग्रहण प्रणाली का उपयोग करके जारी किया गया है।
 Issued under section 12/17 of Registration of Birth and Death Act, 1969 and Rule 6/13 of the Chhattisgarh State Registration of Birth and Death Rules, 2001.
 This is to certify that the following information has been taken from original record of death which is the basis for Local Area/Local body, RAIPUR MUNICIPAL CORPORATION of Raipur District Raipur of State/Union Territory Chhattisgarh.



छत्तीसगढ़ शासन
 GOVERNMENT OF CHHATTISGARH
 (विश्व, योजना, आर्थिक एवं सांख्यिकी विभाग)
 आर्थिक एवं सांख्यिकी विभाग

(DEPARTMENT OF FINANCE, PLANNING, ECONOMICS AND STATISTICS)
 DIRECTORATE OF ECONOMICS AND STATISTICS

रायपुर नगर निगम
 RAIPUR MUNICIPAL CORPORATION

मृत्यु प्रमाणपत्र
 DEATH CERTIFICATE



जन्म मृत्यु नोंदकरण अधिनियम 1969 की धारा 12/17 तथा छत्तीसगढ़ राज्य जनसंख्या नोंदकरण नियम 2001 के नियम 6/13 के अन्तर्गत जारी किया गया।
 Issued under section 12/17 of Registration of Birth and Death Act, 1969 and Rule 6/13 of the Chhattisgarh State Registration of Birth and Death Rules, 2001.

यह प्रमाणित किया जाता है कि निम्नलिखित सूचना मृत्यु के मूल स्रोत से ली गयी है जो कि मूल स्रोत है। रायपुर नगर निगम के अधिकार क्षेत्र में रायपुर नगर निगम के अधिकार क्षेत्र में स्थित है।
 This is to certify that the following information has been taken from original record of death which is the basis for Local Area/Local body, RAIPUR MUNICIPAL CORPORATION of Raipur District Raipur of State/Union Territory Chhattisgarh.

नाम Name	सतीश कुमार खडेलवाल	लिंग Sex	पुरुष Male
मृत्यु तिथि (अथवा Date of Death in Numbers)	24/03/2015	मृत्यु का समय (In Words)	बीसवाँ मार्च दो बीसवाँ पन्द्रह Twenty-Fourth, March Twenty Fifteen
मृत्यु का स्थान Place of Death	रायपुर CG	मृत्यु का स्थान Place of Death	Raipur CG
माता का नाम Name of Mother	*****	माता का नाम Name of Mother	*****
पिता/पति का नाम Name of Father/Husband	सत्यनारायण खडेलवाल	पिता/पति का नाम Name of Father/Husband	*****
मृत्यु के समय का पता Address of deceased at the time of death	*****	मृत्यु के समय का पता Address of deceased at the time of death	*****
रजिस्ट्रेशन संख्या/Registration Number	001012015002080	रजिस्ट्रेशन तिथि/Registration Date	30/03/2015
टिप्पणी/Remarks (if any)	*****	डिजिटल हस्ताक्षर/Digital sign	डॉ. श्रीमती प्रायलक्ष्मी राय/ DR B.L. RAO
जारी करने की तिथि/Date of issue	30/03/2015	सहसचिव स्वास्थ्य अधिकारी, न. न. रायपुर, रायपुर नगर निगम/ Ass. Health Officer, RAIPUR MUNICIPAL CORPORATION	

यह प्रमाणपत्र सतीश कुमार खडेलवाल के मृत्यु के बारे में डिजिटल प्रमाणपत्र है जो कि डिजिटल प्रमाणपत्र है।
 This Certificate is printed copy of electronic certificate related to Death registration of which is recognized as per Chhattisgarh Citizen Service (Electronic Governance) Rules, 2008 under the Information Technology Act 2000.

यह डिजिटल प्रमाणपत्र का संबंध न. न. रायपुर नगर निगम के अधिकार क्षेत्र में रायपुर नगर निगम के अधिकार क्षेत्र में स्थित है।
 This Electronic Certificate is authenticated with the digital signature of Consultant authorized by Municipal Corporation / Nagar Nigam name RAIPUR. This has been verified by the fact the information printed on this death certificate is contained in the above mentioned RAIPUR Corporation.

यह प्रमाणपत्र के अधिकार क्षेत्र में रायपुर नगर निगम के अधिकार क्षेत्र में रायपुर नगर निगम के अधिकार क्षेत्र में स्थित है।
 This Certificate is authenticated with the digital signature of Consultant authorized by Municipal Corporation / Nagar Nigam name RAIPUR.

0771-4080166

यदि इस प्रमाणपत्र की किसी अधिकारी अधिकार क्षेत्र में रायपुर नगर निगम के अधिकार क्षेत्र में स्थित है।
 In case of denial of acceptance of the certificate by any official or official inform the nearest CHDCE center.

दिनांक/Date: 31/03/2015

हस्ताक्षर/Signature

CERTIFIED TRUE COPY

Index/Entry/Record