zota
healthcare ltd.

August 04, 2021

To,
The Manager,
Listing Department,
The National Stock Exchange of India limited
Exchange Plaza,
Bandra Kurla Complex,
Bandra (E), Mumbai- 400051

Dear Sir/Madam,

Trading Symbol: ZOTA

Sub: Communication to Shareholders – Compulsory transfer of unclaimed/ unpaid dividend of financial year 2013-14 to the Investor Education and Protection Fund

With reference to the captioned subject and Pursuant to the provisions of Section 124(5) of the Companies Act 2013 read with Investor Education and Protection Fund Authority (Accounting, Audit, Transfer and Refund) Rules 2016 (IEPF Rules); we have forwarded a circular to those shareholders whose dividend for the financial year 2013-14 remains unclaimed/ unpaid for seven years and stands to be transferred to the Investor Education and Protection Fund on November 05, 2021.

A circular which has been forwarded to the aforementioned shareholders is enclosed herewith for your reference.

Since none of the shareholders have unclaimed/ unpaid dividend for seven consecutive years, no underlying shares against the unclaimed/ unpaid dividend for the year 2013-14 are liable to be transferred to IEPF Authority as per the IEPF Rules. Henceforth, the newspaper advertisement has not been published in this regards.

This is for your information and record.

Thanking you,

Yours faithfully,

For **Zota Health Care Limited**

ZOTA HEALTHCARE LTD.

Ashvin Variya
(Company secretary & Compliance Officer)
Place: Surat
Encl: a/a

Registered Office :
Zota House, 2/896, Hira Modi Street,
Sagrampura, Surat - 395 002 | Ph: +91 261 2331601
Email: info@zotahealthcare.com
Web : www.zotahealthcare.com

Plant :
Plot no. 169, Surat Special Economic Zone,
Nr. Sachin Railway Station, Sachin,
Surat - 394 230 (Guj.) India
Ph: +91 261 2397122

CIN : L24231GJ2000PLC038352

zota healthcare ltd.
CIN: L24231GJ2000PLC038352
Registered office: Zota House, 2/896, Hira Modi Street, Sagrampura, Surat-395002, Gujarat
Email: info@zotahealthcare.com Website: www.zotahealthcare.com Ph: +91 261 2331601

August 04, 2021

To
<Name of Shareholders>
<Name of Joint Shareholders>
<Address>

Dear Shareholder(s),

SUB: NOTICE FOR COMPULSORY TRANSFER OF UNPAID/ UNCLAIMED DIVIDEND OF THE COMPANY TO INVESTOR EDUCATION AND PROTECTION FUND (IEPF)

We wish to inform you that pursuant to the provisions of section 124(5) of the Companies Act, 2013 (the "Act"), read with Investor Education and Protection Fund Authority (Accounting, Audit, Transfer and Refund) Rules 2016 ("IEPF Rules") (including any statutory modification(s), re-enactments(s) thereof for the time being in force) any money transferred to the unpaid Dividend account of a company which remains unclaimed for a period of seven years from the date of such transfer shall be transferred by the company to the Investor Education and Protection Fund ("IEPF Fund"), established under sub-section (1) of Section 125 of the Act.

Unclaimed/ unpaid dividend of the year 2013-14 on which the dividend has not been claimed for seven years stands to be transferred to IEPF Fund as per aforementioned Act and IEPF Rules on November 05, 2021 ("transfer date").

As per the unpaid dividend data available with the Company, you have not claimed the dividend of the following year(s) as per details mentioned below:

Sl. No.	Folio No. / DP ID & Client ID No.	Particulars	Dividend Warrant No.	Amount (Rs.)
1.		Final dividend for the year 2013-14		
2.		Final dividend for the year 2014-15		
3.		Final dividend for the year 2015-16		
4.		Final dividend for the year 2016-17		
5.		Final dividend for the year 2017-18		
6.		Final dividend for the year 2018-19		
7.		Final dividend for the year 2019-20		
Total unclaimed/ unpaid dividend (Rs.)				

To avoid the transfer of unclaimed/ unpaid dividend amount of the year 2013-14 to IEPF Fund, kindly claim the same before the said transfer date by submitting the duly filled Dividend claim form along with self-attested copy of PAN card, original copy of cancelled cheque, address proof, original copy of dividend warrants or dully filled indemnity bond (annexed herewith) to Satellite Corporate Services Pvt Ltd., Share Registrar & Transfer Agent (RTA) of the Company at Unit. No 49, Building No. 13 AB, 2nd Floor, Samhita Commercial Co-Op Society Ltd, Off Andheri Kurla Rd, MTNL Lane, Sakinaka, Mumbai – 400072 or to the Company at Zota House, 2/896, Hira Modi Street, Sagrampura, Surat – 395002, Gujarat.

Failing to claim the unclaimed/ unpaid dividend amount of the year 2013-14 before the aforementioned transfer date, Company will transfer the said amount to IEPF Fund as per manner specified under IEPF Rules.

Since none of shareholders have unclaimed/ unpaid dividend for seven consecutive years, no underlying shares against the unclaimed/ unpaid dividend for the year 2013-14 are liable to be transferred to IEPF Authority as per the IEPF Rules. Henceforth, the newspaper advertisement has not been given in this regards.

In case you have any queries w.r.t. subject matter, you can contact to our RTA on below mentioned contact details or you can mail the queries to Company Secretary & Compliance Officer of the Company on the email ID cszota@zotahealthcare.com

Satellite Corporate Services Pvt Ltd.,
Share Registrar & Transfer Agent (RTA)
Unit. No 49, Building No. 13 AB, 2nd Floor,
Samhita Commercial Co-Op Society Ltd,
Off Andheri Kurla Rd, MTNL Lane, Sakinaka, Mumbai – 400072
Email Id: service@satellitecorporate.com

Thanking you,

Yours faithfully,
For **Zota Health Care Limited**

Sd/-

Ashvin Variya
(Company Secretary & Compliance Officer)
Place: Surat
Encl: a/a

FORMAT OF DIVIDEND CLAIM FORM / INDEMNITY BOND

To
Zota Health Care Limited
Zota House, 2/896 Hira Modi Street,
Sagrampura, Surat - 395002

Dear Sir / Madam,

This is to confirm that I have lost / misplaced / not received dividend(s) / not encashed dividend(s) of Zota Health Care Limited (herein after referred as "Company") as detailed below:

Sl. No.	Folio No. / DP ID & Client ID No.	Particulars	Warrant No.	Amount (Rs.)
5.		Final dividend for the year 2013-14		
6.		Final dividend for the year 2014-15		
7.		Final dividend for the year 2015-16		
8.		Final dividend for the year 2016-17		
5.		Final dividend for the year 2017-18		
6.		Final dividend for the year 2018-19		
7.		Final dividend for the year 2019-20		
Total Unclaimed Dividend (Rs.)				

I hereby request you to please transfer the aforesaid dividend proceeds to my Bank Account as mentioned below in lieu of the aforesaid unclaimed dividend(s).

1. Bank Account details (For electronic credit of unpaid dividend(s) and payment of future dividend(s))

Name of the 1st named holder (as appearing in your cheque book)	
Name of the Bank & Branch address	
Account Number (as appearing in your cheque book)	
Account Type (Savings / Current / Cash Credit)	
9 Digit MICR Number (as appearing on the MICR cheque issued by the bank)	
11 Digit IFSC Code	

I hereby agree to indemnify the Company in the manner hereinafter stated:

I have not charged, pledged, created any sort of encumbrance or otherwise dealt in so as to create any adverse claim upon the aforesaid dividend(s).

Now it is hereby agreed that in consideration of the Company transferring the dividend proceeds to my Bank Account, I hereby covenant at all times hereafter and from time to time save, defend and keep indemnified the Company from and against costs, suits, legal proceedings, accounts, claims, demands, losses, charges, expenses and liabilities of whatsoever nature which the Company may sustain or incur by reason of such re-issue of dividend(s) and also from and against any action which may be brought against the Company by any one claiming the interest accrued thereon and from and against all damages, costs, charges, expenses which the Company may incur in respect thereof otherwise in relation to the premises.

It is hereby further agreed that I hereby undertake to return to the Company such original DD(s) / dividend warrant(s) as and when found or received for cancellation.

In witnesses whereof, I hereto have set and subscribed my respective hands at _____ on _____ (**Date**).

Holder	**Joint Holder 1 (if any)**	**Joint Holder 2 (if any)**
Signature : Date : Name : Address :	Signature : Date : Name : Address :	Signature : Date : Name : Address :

Witness 1	**Witness 2**
Signature : Date : Name : Address :	Signature : Date : Name : Address :

Note:

1. **For the undertaking to be considered complete, please ensure the name, address and bank details of first (1st) holder and joint holder(s), as applicable, are filled correctly and it is duly signed by all the holders and two (2) witnesses.**
2. **If the dividend is in excess of Rs. 2500/-, then please execute this Form on a Non-Judicial stamp paper of the appropriate value or frank the Form for the same appropriate value and have it notarized by a Notary Public under his / her official seal.**