FORM NO. GNL-1

[Pursuant to rule 12(2) of the Companies (Registration offices and Fees) Rules,2014]



Form for filing an application with Registrar of Companies

Form language English Hindi	
Note - All fields marked in * are to be mandatorily filled.	
1. *Category of applicant Company	
2. *Name of office of the registrar of Companies (RoC) to which application is being made	
Registrar of Companies, Mumbai	
3. (a) Corporate identity number (CIN) or foreign company U29268MH2010PLC204223 Pre	-fill
registration number (FCRN) of the company or RUN reference number	
(Service request number (SRN) of RU (1) (b) Global location number (GLN) of company	
4. (a) Name of the company JNK INDIA LIMITED	
(b) Address of the	
Unit No. 203,204,205 & 206, Opp. TMC Office, Centrum IT P ark, Near Satkar Hotel, Than e-West NA	
of the principal place Thane of business in India Thane	
of the Company Maharashtra	
(c) a mail ID of the company	
(c) e-mail ID of the company compliance@jnkindia.com	
5. Details of applicant (in case category is others)	
(a) Name	
(b) Address Line I	
Line II	ī
(c) City	Ħ
(d) State	
(e) ISO country code	
(f) Country	
(g) Pin code	
(h) e-mail ID	\neg
3. *Application filed for	
Compounding of offences	
Extension of period of annual general meeting by three months	
Scheme of arrangement, amalgamation	
Others	
7. If Others, then specify	

8. *Details of application Application for grant of extension for a period of 3 months for holding its Annual General Meeting for the financial year ended on March 31, 2024 i.e. upto 18 November, 2024. Detailed Application has been attached. 9. In case of application for compounding of offences, provide the following details (a) Whether application for compounding offence is filed in respect of Company Director Manager or Secretary or CEO or CFO Other (b) Number of person(s) for whom the application is being filed (c) Details of person(s) for whom the application is being filed (i) Category Director identification number (DIN) or Pre-fill income-tax permanent account number (income-tax PAN) or passport number Name (ii) Category DIN or income-tax PAN or passport number Pre-fill Name (iii) Category DIN or income-tax PAN or passport number Pre-fill Name (iv) Category DIN or income-tax PAN or passport number Pre-fill Name (v) DIN or income-tax PAN or passport number Category Pre-fill Name (vi) Category DIN or income-tax PAN or passport number Pre-fill Name (vii) Category DIN or income-tax PAN or passport number Pre-fill Name (viii) DIN or income-tax PAN or passport number Category Pre-fill Name

(e) Notice number and date of notice	
(f) Section for which application is being filed	
(g) Brief particulars as to how the default has been	made good
. In case of application is made for extension of period	iod of an AGM, mention financial 31/03/2024 (DD/MM/YYY
year end date in respect of which the application is	being filed
11.(a) Service request number of Form MGT-14	
(b) Date of passing special or ordinary resolution	(DD/MM/YYYY)
(c) Date of filing form MGT-14	(DD/MM/YYYY)

Attachments List of attachments Attach BR AGM Extension 30052024.pdf 1. Board Resolution Detailed Application AGM extension.pdf 2. Scheme of arrangement, amalgamation Attach *Detailed application Attach 4. Copy of notice received from RoC or any Attach other competent authority 5. Other attachments - if any Attach Remove Attachment Verification To the best of my knowledge and belief, the information given in this application and its attachments is correct and complete. \bowtie I have been authorised by the Board of directors' resolution number $|_{15}$ (DD/MM/YYYY) dated 30/05/2024 to sign and submit this application. ¬I am duly authorised to sign and submit this form. To be Digitally signed by Managing Director or director or manager or secretary or CEO or CFO (in case of an ASHIS Digitally signed by ASHISH SC H SONI 13:08:41 + 0:073 Indian company or an authorised representative (in case of a foreign company) or other) Designation Company Secretary DIN of the director or Managing Director or; income-tax PAN of the manager or authorised representative; or CEO or CFO Membership number 26538 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: 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 Cost accountant (in whole-time practice) or Chartered accountant (in whole-time practice) or Company secretary (in whole-time practice) Whether associate or fellow Associate Fellow Membership number Certificate of practice number Note: Attention is also drawn to provisions of Section 447, section 448 and 449 of the Companies Act, 2013 which provide for punishment for fraud, punishment for false statement and punishment for false evidence respectively Modify Check Form Prescrutiny Submit For office use only: eForm Service request number (SRN) eForm filing date (DD/MM/YYYY) Digital signature of the authorising officer This e-Form is hereby approved Confirm submission This e-Form is hereby rejected (DD/MM/YYYY) Date of signing