

ANNEXURE: I

Declaration of Ultimate Beneficial Owners Information for Public Procurement Contracts

1. Name: **Maqbool Ahmed**
2. Father's Name/Spouse's Name: **Inayat Hussain**
3. CNIC/NICOP/Passport no.: **35201-4379892-9**
4. Nationality: **Pakistani**
5. Residential address: **H.# 302, Block-EE, DHA Phase-IV, Lahore, Cantt.**
6. Email address: **maqbool@spleenmanufacturing.com.pk**
7. Date on which shareholding, control or interest acquired in the business.
8. In case of indirect shareholding, control or interest being exercised through intermediary companies, entities or other legal persons or legal arrangements in the chain of ownership or control, following additional particulars to be provided:

1	2	3	4	5	6	7	8	9	10	
Name	Legal form (Company/Limited Liability Partnership/Association of Persons/Single Member Company/ Partnership Firm/ Trust/Any other individual, body corporate (to be specified))	Date of incorporation/ registration	Name of registering authority	Business Address	Country	Email address	Percentage of shareholding, control or interest of BO in the legal person or legal arrangement	Percentage of shareholding, control or interest of legal person or legal arrangement in the Company	Identity of Natural Person who ultimately owns or controls the legal person or arrangement	
		"NOT APPLICABLE"								

9. Information about the Board of Directors (details shall be provided regarding number of shares in the capital of the company as set opposite respective names).

1	2	3	4	5	6	7	8
Name and surname (In Block Letters)	CNIC No. (in case of foreigner, Passport No)	Father's/ Husband's Name in full	Current Nationality	Any other Nationality (ies)	Occupation	Residential address in full or the registered/ principal office address for a subscriber other than natural person	Number of shares taken by each subscriber (in figures and words)
Maqbool Ahmed	35201-4379892-9	Inayat Hussain	Pakistani	None	CEO Director	H.No. 302, Block EE, Phase-IV, DHA, Lahore, Cantt.	50%

pcn 5623



Form A
 THE COMPANIES ACT, 2017
 THE COMPANIES (GENERAL PROVISIONS AND FORMS) REGULATIONS, 2018
 (Section 130(1) and Regulation 5)
 ANNUAL RETURN OF COMPANY HAVING SHARE CAPITAL



PART - I

(Please complete in typescript or in bold block capitals)

1.1 Cully Registration Number: 0066514

1.2 Name of the Company: SPLEEN MANUFACTURING (PVT.) LIMITED

1.3 Fee payment details:

1.3.1 Chiten No.	E-2023-1370783	1.3.2 Amount	650.0
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1.4 Form A made upto: dd mm yyyy
15/02/2023

1.5 Date of AGM: dd mm yyyy
13/02/2023

PART - II

Section A

2.1 Registered Office Address: 34KM ASIF TOWN NO 2, 20 KM FERDOSPUR ROAD LAHORE

2.2 Email Address: accounts@splicemfg.com.pk

2.3 Office Tel No: 042-35274991

2.4 Office Fax No: 042-35274994

2.5 Principle line of business: SERVICES - ALLIED (OTHER)

2.6 Mobile No. of Authorized officer (Chief Executive/Director/Company Secretary/Chief Financial Officer): 03004507481

2.7 Authorized Share Capital

Classes and kinds of Shares	No. of Shares	Amount	Face Value
Ordinary Shares		100,000,000.00	

2.8 Paid up Share Capital

Classes and kinds of Shares	No. of Shares	Amount	Face Value
Ordinary Shares		90,000,000.00	

2.9 Particulars of the holding/subsidiary company, if any

Name of Company	Holding/Subsidiary	% Shares Held

2.10 Chief Executive

Name: MAQBODUL AHMAD

Address: 302-EE, PHASE-IV DEFENCE HOUSING AUTHORITY LAHORE

NIC No: 3520143758925

Next Page

INFO: E-DIGITAL CERTIFIED COMPANY NEEDS NO STAMP/SIGNATURE. CERTISSUED DATE: 13/02/2023 (QUALITY OF WORK)

2.18 Transfer of shares (debentures) since last Form A was made

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S#	Name of Transferor	Name of Transferee	No of Shares Transferred	Date of Registration of transfer
Members				
Debenture Holders				

PART-3

3.1 Declaration

I do hereby solemnly and sincerely declare that the information provided in the form is:
 (i) true and correct to the best of my knowledge in consonance with the record as maintained by the Company and nothing has been concealed, and
 (ii) hereby reported after complying with and fulfilling all requirements under the relevant provisions of law, rules, regulations, directives, circulars and notifications whichever is applicable.

3.2 Name of Authorized Officer with designation/ Authorized Intermediary

MAQBOOL AHMAD Chief Executive

3.3 Signatures

Electronically signed by MAQBOOL AHMAD

3.4 Registration No of Authorized Intermediary, if applicable

3.5 Date

Day Month Year
08/02/2023

ISSUED DATE : 13-02-2023 (VALIDITY 03 MONTH)

Transfer of shares (debentures) since last Form A was made

Name of Transferor	Name of Transferee	No of Shares Transferred	Date of Registration of transfer



(Passport if foreigner)
 0723905
 143798929
 105897470
 160527955

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PART-3

I hereby solemnly and sincerely declare that the information provided in the form is true and correct to the best of my knowledge in consonance with the records maintained by the Company and nothing has been concealed; and I hereby reported after complying with and fulfilling all requirements under the relevant provisions of law, rules, regulations, directives, circulars and notifications whichever is applicable.

These alongwith

2 Name of Authorized Officer with designation: Authorized Intermediary **FAKHAR UL ZAMAN SAIF** Chief Executive

3 Signatures: Electronically signed by FAKHAR UL ZAMAN SAIF

4 Registration No of Authorized Intermediary, if applicable: _____

5 Date: Day Month Year
 25/12/2022

THIS IS OFFICIAL CERTIFIED COPY AND NEEDS NO SIGNATURE. CTC ISSUED DATE: 13-02-2023 (VALUITY 91 MO-IN)



Previous Page

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ANNEXURE: I

Declaration of Ultimate Beneficial Owners Information for Public Procurement Contracts.

1. Name *Mr. Fakhar-ul-Zaman Saif*
2. Father's Name/Spouse's Name *Abdul Aziz*
3. CNIC/NICOP/Passport No. *34/01-3287756-3*
4. Nationality *Pakistani*
5. Residential address *House # 347, Block E, Satellite Town Gujranwala.*
6. Email address *fn.enterprises@hotmail.com*
7. Date on which shareholding, control or interest acquired in the business.
8. In case of indirect shareholding, control or interest being exercised through intermediary companies, entries or other legal persons or legal arrangements in the chain of ownership or control, following additional particulars to be provided:

1	2	3	4	5	6	7	8	9	10
Name	Legal form (company/limited liability Partnership/ Association of Persons/Single Member Company/partnership firm/Trust/Any other individual, body corporate (to be specified))	Date of incorporation/ registration	Name of registering authority	Business Address	Country	Email address	Percentage of shareholding, control or interest of BO in the legal person or legal arrangement	Percentage of shareholding, control or interest of legal person or legal arrangement in the Company	Identify of natural person who ultimately owns or controls the legal person or arrangement

9. Information about the Board of Directors (details shall be provided regarding number of shares in the capital of the company as set opposite respective names).

FN POWER
PRIVATE LIMITED

Form A
THE COMPANIES ACT, 2017
THE COMPANIES (GENERAL PROVISIONS AND FORMS) REGULATIONS, 2018
[Section 130(1) and Regulation 4]
ANNUAL RETURN OF COMPANY HAVING SHARE CAPITAL



PART-I

(Please complete in typescript or in bold block capitals)

1.1 Outlets/branches (Number)

1.2 Name of the company

1.3 Fee payment details
1.3.1 Chalan No. 1.3.2 Amount

1.4 Form A made upto

1.5 Date of AGM

PART - II

Section A

2.1 Registered Office Address

2.2 Email Address

2.3 Office Tel. No.

2.4 Office Fax No.

2.5 Principle line of business

2.6 Mobile No. of Authorized officer (Chief Executive/Director/ Company Secretary/ Chief Financial Officer)

2.7 Authorized Share Capital

Classes and kinds of Shares	No. of Shares	Amount	Face Value
Ordinary Shares		50,000,000.00	

2.8 Paid Up Share Capital

Classes and kinds of Shares	No. of Shares	Amount	Face Value
Ordinary Shares		40,200,000.00	

2.9 Particulars of the holding/subsidiary company, if any

Name of Company	Holding/Subsidiary	% Shares Held

2.10 Chief Executive

Name

Address

NIC No.

Next Page

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2.11 Chief Financial Officer

Name: BABAR SHARIF
Address: FAISAL TOWN STREET NO. 04 POST OFFICE BOARD CAMPUS GUJRANWALA
NIC No: 3410126653909



2.12 Secretary

Name: [Blank]
Address: [Blank]
NIC No: [Blank]

2.13 Legal Advisor

Name: BABAR ABDUL MAJID ARIF
Address: 580-E SATELLITE TOWN GUJRANWALA
NIC No: [Blank]

2.14 Particulars of Auditors

Name: MUBARIK ALI KHAN AND CO.
Address: 2/C BLOCK, 1ST FLOOR, TRUST PLAZA, G. T. ROAD, GUJRANWALA

2.15 Particulars of Shares Registrar (if applicable)

Name: [Blank]
Address: [Blank]
Email: [Blank]

Section-B

2.16 List of Directors on the date Annual return is made

S#	Name of Director	Residential Address	Nationality	NIC (Passport No. if foreigner)	Date of appointment / election	Name of Member/Creditors nominating/appointing
1	NAJAM GADEER	House No. 331, Block - B, Satellite Town, Gujranwala GUJRANWALA N/A Pakistan-52250	Pakistan	3410124197095	28/10/2022	
2	FAKHAR UL ZAMAN SAIF	House No. 347 Block E Satellite Town Gujranwala GUJRANWALA N/A Pakistan 52250	Pakistan	3410132877563	28/10/2022	

2.17) List of members & debenture holders on the date upto which this Form is made

Sl	Folio	Name	Address	Nationality	No of shares	Percentage	(Passport if foreigner)
Members							
1		FAKHAR UL ZAMAN SAIF	House No. 347 Block E Satellite Town Gujrat	Pakistan	201000		2877563
2		NAJAM QADEER	House No. 331 Block B Satellite Town Gujrat	Pakistan	201000		3110124197095
Debenture Holders							

In case the member or debenture holder is holding shares or debentures on behalf of other person(s), the name of such other person(s) shall be mentioned in parentheses along with the name of the member or debenture holder.

Previous Page Next Page

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AND REGISTRATION OF SIGNATURES. CITE ISSUED DATE 12-11-2015. (VALIDITY 21 MONTHS)

INSTRUCTIONS FOR REVOLVING CREDIT



Previous Page

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