



Jamhuri ya Muungano wa Tanzania

United Republic of Tanzania

Pharmacy Council

Exchequer Receipt

Stakabadhi ya Malipo ya Serikali

Receipt No : 924352297590851

Received from : LEO PHARMACY

Amount : 100,000.00

Amount in Words : One Hundred Thousand TZS And Zero Cent(s) Only

Outstanding Balance : 0.00

In respect of	Item Description(s)	Item Amount
: 142202540104 - Application for change of name/ ownership - 1	100,000.00	

Total Billed Amount :

100,000.00 (TZS)

Bill Reference : 16212352243555067441

Payment Control Number : 991620285256

Payment Date : 2024-12-17 12:51:54

Issued by : Zena Mango

Date Issued : 2024-12-17 13:00:55

Signature :

Government Payment Gateway © 2017 All Rights Reserved (GePG)

PHARMACY COUNCIL

991620285256

Asandwe Control number
102,000/2

PCF.14

PHARMACY COUNCIL



APPLICATION FOR ALTERATION (Under Section 35 (1) of Pharmacy Act, 2011)

Registrar,
Pharmacy Council,
P.O. Box 1277,
Dodoma.

APPLICATION FOR CHANGE OF:

1. PREMISES LOCATION ☐
2. BUSINESS NAME ☒
3. BUSINESS OWNERSHIP ☐

SECTION A: APPLICANT CURRENT INFORMATION:

NAME OF PREMISES: LED PHARMACY FIN:

TYPE OF BUSINESS: Retail Pharmacy ☒ Wholesale Pharmacy ☐ Warehouse ☐

PHYSICAL ADDRESS:

Plot No. Street: WAITARA Ward: WAZO

District/Municipal: KINONDONI Region: DAR ES SALAAM

POSTAL ADDRESS: Contact No. 0769 731072

E-mail: edify18@gmail.com

OWNERSHIP:

Directors (Names): 1. EDIFA I. EDSON Qualification: PHARMACIST

2. Qualification:

3. Qualification:

SUPERINTENDANT INFORMATION:

Full Name: CHRISTINE ANYANGO PIN: 0102376

Residential Address: TEMEKE Tel: 0686 Email: christinemartine4@gmail.com

Contract commencement date: 1st September 2024 Cessation date: 31st August 2025

SECTION B: PROPOSED CHANGES:

NAME OF THE NEW PREMISES: SUPERMEDIC PHARMACY & COSMETICS

TYPE OF BUSINESS: Retail Pharmacy ☒ Wholesale Pharmacy ☐ Warehouse ☐

PHYSICAL ADDRESS:

Plot No. Street: WAITARA Ward: WAZO

District/Municipal: KINONDONI Region: DAR ES SALAAM

POSTAL ADDRESS: CONTACT No. 0769 731072

NEW OWNERSHIP: (IF DIFFERENT FROM PREVIOUS ONE)

Directors (Names):

1. EDIFAI EDSON Qualification: PHARMACIST
2. Qualification:
3. Qualification:

SUPERINTENDANT INFORMATION: (IF DIFFERENT FROM PREVIOUS ONE)

Full Name: CHRISTINE ANYANGO PIN: D102376
 Residential Address: TEMEKE Tel: 068620602 Email: christinemartinet@gmail.com
 Contract commencement date: 1st September 2024 Cessation date 31st August 2025

SECTION C: REASON(S) FOR PARTICULAR ALTERATION

1. Particular Alteration is because the ^{previous} name was rejected by Business Registration AND Licensing Agency as it has been already used by other applicant.
2.

SECTION D: APPLICANT INFORMATION

Name of Applicant: EDIFAI EDSON
 (Contact/email if different from the above)
 Address: Tel: 0769731072 E-mail:
 Signature of Applicant: E. Edson Date: 17th Dec. 2024

SECTION E: APPLICANT DECLARATION

I hereby declare to the best of my sanity that the information provided is valid and there are mutual agreements of terms between parties.

Signature of Applicant: E. Edson Date: 17th December 2024

SECTION F: REQUIRED ATTACHMENT

Please attach the following documents depending on your proposed changes:

1. TAX CLEARANCE CERTIFICATE
2. Copy of lease agreement or title deed
3. Memorandum of Understanding
4. Certificate of registration from BRELA
5. Copy of Director(s) ID
6. Original Premises Registration Certificate (For Alteration No. 1 or 2)

EDIFAI EDSON BUZAILE

S.L.P

DAR ES SALAAM.

12/12/2024.

MSAJILI,

BARAZA LA FAMASI,

S.L.P 1277,

DODOMA.

NDG Msajili,

YAH: OMBI LA KUBADILISHA JINA LA FAMASI .

Tafadhali husika na kichwa cha barua hapo juu,

Mimi Edifai Edson mmiliki wa famasi mpya inayoitwa LEO PHARMACY Kama ilivo thibitishwa katika barua ya uthibitsho wa usajili wa eneo na kibali Cha kuendesha biashara ya famasi yenye kumb na BC.43/311/01F/250. Jina hili la LEO PHARMACY limekataliwa na wakala wa usajili wa biashara na leseni(BRELA) Kwa sababu tayari limesajiliwa kwa mwombaji mwingine nakushauri nibadilishe jina ili kuondoa mkanganyiko.

Kupitia Barua hii naomba kubadilisha jina la biashara kutoka LEO PHARMACY & COSMETICS na kuwa SUPERMEDIC PHARMACY & COSMETICS ambalo ndilo limekubalika na kusajiliwa na BRELA.

Pamoja na barua hii nimeambatanisha nakala ya cheti Cha usajili kutoka BRELA

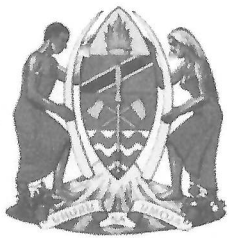
Natanguliza shukrani.

Wako mtiifu,



Edifai Edson Buzaile,

0769731072



TANZANIA

Form 5



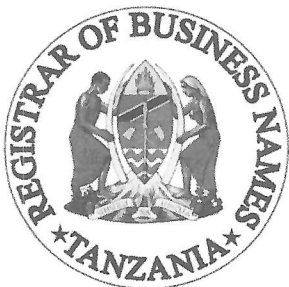
No. 591119

Certificate of Registration

The Business Names (Registration) Act (Cap 213)

I HEREBY CERTIFY THAT SUPERMEDIC PHARMACY & COSMETICS this 10th day of DECEMBER year 2024 has been duly registered pursuant to and in accordance with the provisions of the Business Names (Registration) Act and the Rules made thereunder, and has been entered the Number 591119 in the Index of Registration.

GIVEN under my hand at Dar es Salaam this 10th day of DECEMBER TWO THOUSAND AND TWENTY FOUR.



Deputy Registrar Business Names

NOTE – This certificate must be kept in a conspicuous position at the principal place of business. Any change in the particulars originally registered must be notified to the Registrar within twenty eight days.

