Jamhuri ya Muungano wa Tanzania

United Republic of Tanzania

Pharmacy Council

Exchequer Receipt

Stakabadhi ya Malipo ya Serikali

Receipt No	**: 925315381839396**
Received from	: SMART PHARMACY
Amount	: 200,000.00
Amount in Words	: Two 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 - ALTERATION OF NAME AND OWNERSHIP A	**200,000.00**	
	Total Billed Amount :	**200,000.00 (TZS)**

Bill Reference	: 16209315254507659646
Payment Control Number	**: *991620342565***
Payment Date	**: 2025-11-11 14:30:00**
Issued by	: Zena Mango
Date Issued	: 2025-11-11 15:03:30
Signature	: .....

PHARMACY COUNCIL

PCF.14

PHARMACY COUNCIL

Alipie 200,000/-
Alteration of name and ownership.
11/10/2025

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: SMART PHARMACY FIN 0103299

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

PHYSICAL ADDRESS:

Plot No. KND028058 Street: KIGOGO Ward.....

District/Municipal. MKWAJUNI | KIGOGO Region: DAR ES - SALAAM.

POSTAL ADDRESS: .....Contact. No. .....

E-mail: .....

OWNERSHIP:

Directors (Names): 1. NDESARIO S. NKYA Qualification: DIRECTOR

2. ..... Qualification: .....

3. ..... Qualification: .....

SUPERINTENDANT INFORMATION:

Full Name: NDESARIO SILAS NKYA PIN: 040304

Residential Address: CHAMAZI Tel: 0758049814 Email: Ndesarionkya@gmail.com

Contract commencement date: ..... Cessation date.....

SECTION B: PROPOSED CHANGES:

NAME OF THE NEW PREMISES: HAWILAH PHARMACY

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

PHYSICAL ADDRESS:

Plot No. KN028058 Street KIGOGO/MKWAJUNI Ward.....

District/Municipal..... Region DAR-ES-SALAAM

POSTAL ADDRESS: 71911 DSM CONTACT. No. 0713264060

NEW OWNERSHIP: (IF DIFFERENT FROM PREVIOUS ONE)

Directors (Names):

1. PAULINE E. UYSENDESYA Qualification: DIRECTOR ENTERPRENUER
2. ..... Qualification: .....
3. ..... Qualification: .....

SUPERINTENDANT INFORMATION: (IF DIFFERENT FROM PREVIOUS ONE)

Full Name: FAITH GODLISTEN DIAH PIN: 01041103

Residential Address: DAR-ES-SALAAM Tel: 0743587057 Email: faithdiah6@gmail.com

Contract commencement date: 01.10.2025 Cessation date 30.09.2026

SECTION C: REASON(S) FOR PARTICULAR ALTERATION

1. SEEKING NEW EXPERIENCE
2. BUSINESS OPPORUNITY

SECTION D: APPLICANT INFORMATION

Name of Applicant: PAULINE E. UYSENDESYA.

(Contact/email if different from the above)

Address: DAR-ES-SALAAM Tel: 0713264060 E-mail: pauline.uysendesya@yahoo.com

Signature of Applicant ..... Date 20/10/25

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 ..... Date 20/10/25

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)

TANZANIA REVENUE AUTHORITY

ISO 9001: 2015 CERTIFIED

TAX CLEARANCE CERTIFICATE

(Issued Under Regulation 103 of Tax Administration (General) Regulations, 2016)

Licencing Authority; TIN : 101-046-656
MKURUGENZI MANISPAA TEMEKE
NATIONAL STADIUM
46343
DAR ES SALAAM

Tax Certificate Number: **141-0228-3720**

Issuing Office: Temeke
Telephone: 022-2861122
Date of issue: 10 November 2025
Expiry Date: 31 December 2025

Taxpayer Name	NDESARIO SILAS NKYA		
Trading Name			
Taxpayer Identification Number	165-162-056	Vat Registration Number	
Company Registration Number			

Business Premises located at :
REGION : DAR ES SALAAM
DISTRICT : KIGAMBONI
STREET : VIJIBWENI

This is to certify that the above registered Taxpayer has complied with tax laws and has been granted Tax Clearance Certificate with respect to the following business(es):

1	Retail sale of pharmaceutical and medical goods, cosmetic and toilet articles in specialized stores

Alfred T. Mregi
COMMISSIONER FOR DOMESTIC REVENUE
10 November 2025

Disclaimer :

1. This certificate is issued free of charge
2. This certificate should be tendered in its original form and it is valid only if it is embossed with QR Code
3. This Tax Clearance Certificate shall not preclude the Commissioner General from demanding and recovering taxes established after issuance of this Certificate.

MKATABA WA MAUZIANO YA DUKA LA DAWA

Makubaliano haya yamefanyika leo hii tarehe ...14.....mwezi Septemba, 2025

kati ya

Bw. Ndesario Silas Nkya, Mwanaume, Mtu Mzima, Mkristo, Mkazi wa Chamazi, Dar es Salaam, Simu Na. 0758 049 814 , Kitambulisho cha taifa (NIDA) Na. 20000912151280000128, ambaye kwenye mkataba huu atajulikana kama "**Muuzaji**" kwa upande mmoja,

Na

Bi. Pauline Emil Kyendesya, Mwanamke, Mtu Mzima, Mkristo, Mkazi wa Dar es Salaam, Simu Na.: 0713 264 060, Leseni ya Udereva Na. 4000839309, Kitambulisho cha Taifa (NIDA) Na. 19800112-14120-00001-18 ambaye katika mkataba huu atajulikana kama "**Mnunuzi**" kwa upande wa pili.

YA KWAMBA, Muuzaji ni mmiliki halali wa duka la dawa linalofahamika kwa jina la "M/S Smarts Pharamacy" lililopo kwenye Kitalu Na. KND028058, Mkwajuni Kigogo jijini Dar es Salaam, na limesajiliwa na Baraza la Famasi (Pharmacy Council) kwa Na. 0103299, usajili ambao utafikia ukomo tarehe 30 Juni, 2029.

YA KWAMBA, Muuzaji kwa hiari yake pasipo kulazimishwa na mtu yeyote ameridhia kuuza duka hilo, na Mnunuaji naye kwa upande wake pasipo kulazimishwa na mtu yeyote ameridhia kununua duka hilo kwa mujibu wa masharti yaliyopo kwenye makubaliano haya.

HIVYO BASI, pande zote mbili zinakubaliana kama ifuatavyo:-

1. Kwamba, Duka la Dawa linauzwa kwa gharama ya kiasi cha TZS 16,000,000/= (Shilingi za Kitanzania Millioni Kumi na Sita Tu). Gharama hiyo inajumuisha gharama ya fremu kwa muda wa pango uliobakia, dawa zilizomo ndani ya Duka pamoja na usajili wa Duka kwa Mamlaka husika.

2. Kwamba, Mnunuzi amemlipa Muuzaji gharama yote ya ununuzi wa Duka la Dawa, kiasi ambacho kimelipwa tarehe 14 Septemba, 2025. Hivyo, kwa kusaini makubaliano haya Mnunuzi anakiri na kuthibitisha kupokea malipo yote ya mauzo ya Duka.

3. Kwamba, Muuzaji atamkabidhi Mnunuzi Duka la Dawa na nyaraka zote halisi zinazohusiana na pango ya eneo la Duka, umiliki na usajili wa Duka la Dawa. Aidha, nyaraka hizo zitakabidhiwa kwa Mnunuzi mara tu baada ya kusaini makubaliano haya.

4. Kwamba, kila upande utawajibika kutoa ushirikiano wowote utakaohitajika ili kuweza kufanikisha zoezi la ubadilishwaji wa taarifa za usajili kwenye Baraza la Phamasi endapo itabainika kuna ulazima wa kufanya hivyo.

5. Kwamba, iwapo itatokea changamoto yoyote kuhusu malipo ya pango ya eneo la Duka, Umiliki wa Duka na Usajili wa Duka katika Baraza la Famasi kwa mujibu wa sheria, au ikagundulika kuwa kuna kasoro katika uhalali wa umiliki wa Duka kwa upande wa Muuzaji, Mnunuzi atakuwa na haki ya kufidiwa athari hiyo kwa thamani sawa na kiwango kilichoathirika.

6. Kwamba, endapo kutatokea mabadiliko yoyote katika masharti haya pande zote mbili zitakaa kwa pamoja kuridhia mabadiliko hayo na kuyarasimisha kwa njia ya maandishi. Aidha, chochote kitakachokubaliwa kitasomeka kama nyongeza ("*addendum*") ya sehemu ya makubaliano haya.

7. Kwamba, mkataba huu utaongozwa na sheria za Nchi ya Tanzania na endapo kutatokea mgogoro wowote kuhusiana na utekelezaji wa masharti au sehemu ya masharti katika makubaliano, pande zote mbili zitakaa na kutatua mgogoro huo kwa amani na upande utakaodhani umeathirika unahaki ya kufuata taratibu za kisheria katika kutatua mgogoro na kudai haki.

HIVYO BASI, pande zote zinathibitisha mauziano haya kwa kuweka saini zao kama inavyoonekana hapa chini:-

Umesainiwa hapa **Dar es Salaam** na kutolewa
Na **Bw. Ndesario Silas Nkya** ambaye
ametambulishwa kwangu na Jonas A. Kimaro
Amnbaye ninamfahamu leo hii tarehe 14
Mwezi , Septemba, 2025

MUUZAJI

MBELE YA: -

Jina : DIANA J. FUE
Sahihi:
Anwani: Box 14521 DSM
Wadhifa: WAKILI

Diana Julius Fue
Box 14521 Dar es Salaam
Advocate, Notary Public & Commisisioner For Oaths

Jina:
Sahihi:
Anwani:
Wadhifa:

Umesainiwa hapa **Dar es Salaam** na Kutolewa
Na Bi. **Pauline Emil Kyendesya** ambaye
ninamfahamu leo hii tarehe _____Mwezi
Septemba, Mwaka 2025

MNUNUZI

MBELE YA: -

Jina : DIANA J. FUE
Sahihi:
Anwani: Box 14521 DSM
Wadhifa: [redacted]

Diana Julius Fue
Box 14521 Dar es Salaam
Advocate, Notary Public & Commisisioner For Oaths

Jina:
Sahihi:
Anwani:
Wadhifa:

UMEANDALIWA NA:

Charles Mtae,
Wakili na Kamishina wa Viapo,
S.L.P 71554,
DAR ES SALAAM.
Baruapepe: charlesmtae@gmail.com

MKATABA WA KUPANGISHA FREMU

Mkataba umefikiwa kati ya ndg; ZAINAB OMAR RASHID ambaye ni mwenyenyumba na ndg; PAULINE KYSENDESYA ambaye ni mpangaji leo tarehe. 15/09/25 hadi tarehe. 15/03/26 kwa bei ya sh: 350 000 kwa mwezi na kodi inayopokelewa ni miezi sita kiasi cha sh; ...2,100,000/=

MASHARTI YA KUZINGATIA:

1. Mpangaji atawajibika kutunza mazingira yote ya nje na ndani ya ofisi yake
2. Gharama za maji na umeme ni jukumu la mpangaji mwenyewe
3. Mpangaji atawajibika kushiriki na kutunza usafi wa mazingira ya choo kuepuka hali ya kupishana lugha
4. Hairuhusiwi kufanya ukarabati wowote bila kuwasiliana na mwenyenyumb
5. Mpangaji haruhusiwi kumpangisha mtu mwingine badala yake ikibainika mkataba unavunjwa hapohapo.
6. Mpangaji asipolipa kodi zaidi ya mwezi mmoja bila taarifa yoyote mwenyenyumba ana haki ya kuvunja mkataba
7. Lugha za matusi,ugomvi,au maneo ya kebehi haviruhusiwi katika eneo la biashara kwa kufanya hivyo mwenyenyumba ana haki ya kuvunja mkataba
8. Endapo kuna mabadiriko yoyote au taarifa yoyote ya kusitisha mkataba au mengineyo tutapeana taarifa ya awali mwezi mmoja kabla ya mkataba kuisha.

JINA LA MWENYE NYUMBA: ZAINAB OMAR RASHID
SAHIHI YA MWENYE NYUMBA: Omari

JINA LA MPANGAJI: PAULINE KYSENDESYA
SAHIHI YA MPANGAJI: Kysendesya

SHAHIDI WA MPANGAJI: AGNESS RAPHAEL
SAHIHI YA SHAHIDI WA MPANGAJI: AR

PHARMACY COUNCIL

PREMISES REGISTRATION CERTIFICATE

Made under Section 34 (1) of the Pharmacy Act Cap.311

FIN: 0103299

This is to certify that the premises owned by M/S ***Smarts Pharmacy*** of ***P.O.Box , Dar es Salaam*** located at ***Plot No.KND028058, Mkwajuni, Kigogo*** Municipality/District in ***Dar es Salaam*** Region has been registered for ***Retail Only*** to sell pharmaceutical and related products with Facility Identification Number (FIN) ***0103299***

Issued in: ***August 2024***

Expires on: ***30 June 2029***

23-09-2024

DATE:

SIGNATURE OF REGISTRAR AND STAMP

Registrar Pharmacy Council P. O. Box 1277 Dodoma

CONDITIONS

1. *The premises and the manner in which the business is conducted must conform to the category of pharmacist business registered*
2. *This certificate does not authorize the holder to sell or supply medicines, medical devices and diagnostics illegally to unlicensed premises*
3. *Any changes such as ownership, superintendent pharmacist, business name, physical address and location of the registered premises shall be approved by the Pharmacy Council*
4. *This certificate is non transferable to other premises or to any other person*
5. *Both certificate and business permit shall be displayed conspicuously in the registered premises*