

99102022 8415

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: NDANEKWA PHARMACY FIN: 0300506

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

#### PHYSICAL ADDRESS:

Plot No. 52 Street: KALANGALALA Ward: KALANGALALA

District/Municipal: GEITA Region: GEITA

POSTAL ADDRESS: P.O. Box 538 GEITA Contact No. 0742411878

E-mail: ndanekwa-pharmacy@gmail.com

#### OWNERSHIP:

Directors (Names): 1. NEEMA BONIPHACE SALEHE Qualification: .....

2. - Qualification: -

3. - Qualification: -

#### SUPERINTENDANT INFORMATION:

Full Name: JUMA MANGOMBE PIN: 0101469

Residential Address: P.O. Box 40 GEITA Tel: 0762555076 Email: jmangombe12@gmail.com

Contract commencement date: 01/07/2023 Cessation date: 30/06/2024

#### SECTION B: PROPOSED CHANGES:

NAME OF THE NEW PREMISES: .....

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

#### PHYSICAL ADDRESS:

Plot No. - Street: - Ward: -

District/Municipal: - Region: -

POSTAL ADDRESS: - CONTACT No. -

## NEW OWNERSHIP: (IF DIFFERENT FROM PREVIOUS ONE)

Directors (Names):

1. NEEMA BONIPHACE SALEHE Qualification: DIRECTOR
2. NKWABI LINDA MPYALIMU Qualification: DIRECTOR
3. .... Qualification: .....

## SUPERINTENDANT INFORMATION: (IF DIFFERENT FROM PREVIOUS ONE)

Full Name: ..... PIN: .....

Residential Address: ..... Tel: ..... Email: .....

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

## SECTION C: REASON(S) FOR PARTICULAR ALTERATION

1. SOLE PROPRIATOR TO COMPANY OWNERSHIP SO  
AS TO STABILIZE THE BUSINESS.
2. ....

## SECTION D: APPLICANT INFORMATION

Name of Applicant: NEEMA BONIPHACE SALEHE

(Contact/email if different from the above)

Address: GETA Tel: 0742411878 E-mail: .....

Signature of Applicant: N. boniphace Date: 13/12/2023

## 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: N. boniphace Date: 13/12/2023

## 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)





Jamhuri ya Muungano wa Tanzania

United Republic of Tanzania

**Pharmacy Council**

Exchequer Receipt

**Stakabadhi ya Malipo ya Serikali**

Receipt No : 923349220679148

Received from : Ndanekwa 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 - Change of ownership		100,000.00

**Total Billed Amount :** 100,000.00 (TZS)

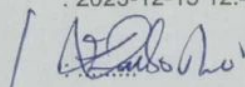
Bill Reference : 16211349235844183867

Payment Control Number : 991620228415

Payment Date : 2023-12-15 12:46:13

Issued by : Beatuss Mpogoza

Date Issued : 2023-12-15 12:49:20

Signature 



**TANZANIA REVENUE AUTHORITY**

**ISO 9001: 2015 CERTIFIED**

# **TAX CLEARANCE CERTIFICATE**

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

Licencing Authority; TIN : 156-093-963

KAHAMA MUNICIPAL COUNCIL

MALUNGA

472

KAHAMA

Tax Certificate Number:

**391-0186-2112**

Issuing Office: Kahama

Telephone: 0282710042

Date of issue: 27 November 2023

Expiry Date: 31 December 2023

Taxpayer Name	NKWANE PHARMACY LIMITED		
Trading Name			
Taxpayer Identification Number	152-708-068	Vat Registration Number	
Company Registration Number			

Business Premises located at :

REGION : SHINYANGA,

DISTRICT : KAHAMA,

STREET : NAMANGA

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 | Other human health activities |
| 2 | Other education n.e.c.        |

**Alfred T. Mregi**

**COMMISSIONER FOR DOMESTIC REVENUE**

27 November 2023



**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.

THE COMPANIES ACT NO 12 OF 2002  
COMPANY LIMITED BY SHARES

MEMORANDUM  
AND  
ARTICLE OF ASSOCIATION  
OF  
**NKWANE PHARMACY LIMITED**

**Drawn by:**  
NEEMA BONIPHACE SALEHE (Subscriber)  
P.O. BOX 647  
KAHAMA



THE COMPANIES ACT NO 12 OF 2002

COMPANY LIMITED BY SHARES

MEMORANDUM OF ASSOCIATION

OF

**NKWANE PHARMACY LIMITED**

1. The name of company is NKWANE PHARMACY LIMITED
2. The registered office of the company is situated in the United Republic of Tanzania.
3. The objects for which company is established are:
  - (a) To carry on the business of supply of stationeries, cleaning materials, supply of consumable, and accessories for office equipment such as fax, printers etc., supply of office furniture's and fittings.
  - (b) To engage on the business of supply of uniforms, bedding, and textile materials.
  - (c) To carry on the business of supply and installation of desktop computers, laptops, and any other media equipment.
  - (d) To carry on all or any of the business of printers, stationery, lithographers, type setters stereotypes, electrotypes, photographic printers, chromolithographers, booksellers, bookbinders, publishers, advertising agents ink and paper sales, mobile phone sales, and dealers in or manufacturer of any other articles or things of a character similar, or analogous to the foregoing or any of them or connected there with.
  - (e) To carry on the business of M-pesa, Tigo pesa, Airtel Money, Z pesa, Halopesa, TTCL and Bank agents.
  - (f) To carry business of sale of Industrial and Residential electrical equipments and all its accessories, solar power and all its accessories, solar power installation and electrical installation.

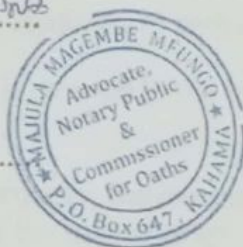
Name, Postal Address and Description of Subscribers	Number of shares taken by each Subscriber	Signature of each Subscriber
NEEMA BONIPHACE SALEHE P.O. BOX 647 KAHAMA	50	N'boniphace
NKWABI LINDA MPYALIMU P.O. BOX 647 KAHAMA	50	Nkwabi

Signed at Kahama as of this 08<sup>th</sup> day of July 2021

WITNESS to the above Signatures.

Name MAMULA MAMBE MAMBE

Signature [Signature]



Qualification Advocate

against all costs, charges, expenses losses and liabilities sustained or incurred by the conduct of the company's business or in the discharge of his duties.

### WINDING UP

71. With the sanction of special Resolution of shareholders any party of the assets of the Company including any shares in other companies may be divided between the members of the company in specie or may be vested in Trustees for the benefit of such members and the liquidation of the company may be closed and the company dissolve but so that no member shall be compelled to accept any shares whereupon there is any liability.

### ARBITRATION

72. If and whenever any dispute or difference shall arise between the company and any of the members or their respective representatives touching upon the construction or meaning of any of the articles herein contained or any act matter or thing made or done or omitted to be done or with regard or the rights or liabilities arising here under or arising out of the relation existing between the parties by reason of these articles of the Act , such differences shall (unless a sole arbitrators, one in the event of failure to agree within or any then existing statutory modifications or re-enactment there of shall apply.

We, the several persons whose names and addresses are subscribes, are desirous of being formed into a company I pursuance of this Article of Association and we respectively agree to take the number of shares in the capital of the company set opposite our respective names.

Name, Postal Address and Description of Subscribers	Number of shares taken by each Subscriber	Signature of each Subscriber
NEEMA BONIPHACE SALEHE P.O. BOX 647 KAHAMA	50	N. Boniphace
NKWABI LINDA MPYALIMU P.O. BOX 647 KAHAMA	50	NKWABI

Signed at Kahama as of this 08th day of July 2021

WITNESS to the above Signatures.

Name MAJULA MAGEMBE MAUNGO

Signature [Signature]

Qualification ADVOCATE





**TUME YA TAIFA YA UCHAGUZI**  
**KADI YA MPIGA KURA**



**Jina Kamili - Full Name**  
NEEMA S SALEHE

**Tarehe ya Kuzaliwa - Date of Birth**  
02/08/1984

**Jinsia - Gender** ME

**Kata - Ward**  
IGULWA

**Mtaa/Kiji - Street/Village**  
IGULWA

**Kizu cha Kuandikwa - Registration Centre**  
OFISI YA KITONGOJI IMALAMAGIGO



**Namba ya Mpiga Kura** I-1000-2554-921-4



*Ni compliance*

**KADI HII IMETOLEWA NA TUME YA TAIFA YA UCHAGUZI**



**MKURUGENZI WA UCHAGUZI**

Kadi hii ni mali ya Tume ya Taifa ya Uchaguzi haruhusiwa kufanyia mabadiliko ya aina yoyote wala kumpatia mtu anayehuswa kuitumia kama kigotwa au kuharibika taa taarifa ofisi ya Tume ya Taifa ya Uchaguzi.  
S.L.P 10923 Dar es Salaam  
Simu: +255 22 21 14963 - 6



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JMA: S NKWABE LINDA  
CROSS: MARIO

