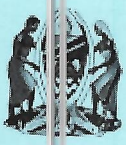

Jamhuri ya Muungano wa Tanzania

United Republic of Tanzania

Pharmacy Council

Exchequer Receipt

Stakabadhi ya Malipo ya Serikali

Receipt No	**: 924005224889410**
Received from	: TANDIKA GOLDEN 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 NAME*		**100,000.00**

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

Bill Reference	: 16214005241251227003
Payment Control Number	**: *991620233739***
Payment Date	**: 2024-01-05 15:02:49**
Issued by	: Zena Mango
Date Issued	: 2024-01-09 10:16:31
Signature	: .....

PHARMACY COUNCIL

PHARMACY COUNCIL

99162023373 9

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: TANSIKA GOLDEN PHARMACY FIN: 0100521

TYPE OF BUSINESS: Retail Pharmacy [✓] Wholesale Pharmacy [ ] Warehouse [ ]

PHYSICAL ADDRESS:

Plot No. 52 Street: CHIOTA STREET Ward: TANSIKA

District/Municipal: TEMEKE Region: DAR-ES SALAM

POSTAL ADDRESS: 105368 DSM Contact. No. 0784-627917

E-mail: Platinum grade ltd @gmail.com

OWNERSHIP:

Directors (Names): 1. YUSUPH A. MANENTO Qualification: DEGREE

2. AMIRI R. MANENTO Qualification: DEGREE

3. MARIAM S. KUDALA Qualification: DEGREE

SUPERINTENDANT INFORMATION:

Full Name: SUZANE EFRAME PIN: 1215

Residential Address: Tel Email:

Contract commencement date: Cessation date

SECTION B: PROPOSED CHANGES:

NAME OF THE NEW PREMISES: PLATINUM PHARMACY TANSIKA

TYPE OF BUSINESS: Retail Pharmacy [✓] Wholesale Pharmacy [ ] Warehouse [ ]

PHYSICAL ADDRESS:

Plot No. 52 Street CHIOTA Ward TANSIKA

District/Municipal TEMEKE Region DAR-ES SALAAM

POSTAL ADDRESS: 105368 DSM CONTACT. No. 0784-627917

NEW OWNERSHIP: (IF DIFFERENT FROM PREVIOUS ONE)

Directors (Names):

1. YUSUPH A MANENTO Qualification: DEGREE
2. AMIRI R MANENTO Qualification: DEGREE
3. MARIAM S KULAVA Qualification: DEGREE

SUPERINTENDANT INFORMATION: (IF DIFFERENT FROM PREVIOUS ONE)

Full Name: SUZANE EFRAME PIN: 1215

Residential Address: DAR ES SALAAM Tel: 0714407592 Email:

Contract commencement date: Cessation date

SECTION C: REASON(S) FOR PARTICULAR ALTERATION

1. FOR MARKETING AND REBRANDING THE BUSNESS
2. TRADEMAK ISSUES AND NEW NAME STANDS OUT

SECTION D: APPLICANT INFORMATION

Name of Applicant: YUSUPH A. MANENTO

(Contact/email if different from the above)

Address: 105368 Tel: 0784627917 E-mail: Platinum grade ltd@gmail.com

Signature of Applicant: Y. manento Date: 9/12/2023

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: Y. Manento Date: 9/12/2023

PLATINUM GRADE LTD P.O. Box 105368 DAR ES SALAAM

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)