

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 | <input type="checkbox"/> |
| 2. BUSINESS NAME | <input checked="" type="checkbox"/> |
| 3. BUSINESS OWNERSHIP | <input checked="" type="checkbox"/> |

SECTION A: APPLICANT CURRENT INFORMATION:

NAME OF PREMISES: TUMAINI PHARMACY FIN: 0100890

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

PHYSICAL ADDRESS:

Plot No. Street: SOWETO Ward: RUWANDA

District/Municipal: MBETA Region: MBETA

POSTAL ADDRESS: P.O. Box 2851 MBETA Contact. No. 0655678707

E-mail:

OWNERSHIP:

Directors (Names): 1. TUMAINI MARK MSHYA Qualification: OWNER

2. Qualification:

3. Qualification:

SUPERINTENDANT INFORMATION:

Full Name: KELVIN MULETO PIN: 0101561

Residential Address: MBETA Tel: 0744839512 Email: kvoo213@gmail.com

Contract commencement date: 30th MAY 2024 Cessation date: 30th MAY 2025

SECTION B: PROPOSED CHANGES:

NAME OF THE NEW PREMISES: MEDIBLOOM PHARMACY

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

PHYSICAL ADDRESS:

Plot No. Street: SOWETO Ward: RUWANDA

District/Municipal: MBETA Region: MBETA

POSTAL ADDRESS: P.O. Box 144MBETA CONTACT. No. 0752367369

NEW OWNERSHIP: (IF DIFFERENT FROM PREVIOUS ONE)

Directors (Names):

1. GOODLUCK ADYCE LIMO Qualification: DIRECTOR
2. ABISHAE EVARISTO MLOWE Qualification: DIRECTOR
3. Qualification:

SUPERINTENDANT INFORMATION: (IF DIFFERENT FROM PREVIOUS ONE)

Full Name: KELVIN MALETO PIN: 0101561
 Residential Address: MBEYA Tel: 0744839512 Email: k400213@gmail.com
 Contract commencement date: 30th MAY 2025 Cessation date 30th MAY 2026

SECTION C: REASON(S) FOR PARTICULAR ALTERATION

1. CHANGE OF MANAGEMENT.
2.

SECTION D: APPLICANT INFORMATION

Name of Applicant: ABISHAE EVARISTO MLOWE
 (Contact/email if different from the above)
 Address: MBEYA Tel: 0752363269 E-mail: Abishae Mlowe11@gmail.com
 Signature of Applicant: A. Mlowe Date: 30/06/2025

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: ABISHAE EVARISTO MLOWE Date: 30th JUNE 2025
A. Mlowe

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
KITAMBULISHO CHA TAIFA
THE UNITED REPUBLIC OF TANZANIA
CITIZEN IDENTITY CARD



19720119-53107-00001-23

JINA : TUMAINI MARK
Given Name

JINA LA MWISHO : MSUYA
Last Name

TAREHE YA KUZALIWA : 19 JAN 1972
Date of Birth

JINSI : M
Sex

SAINI :
Signature

MWISHO WA MATUMIZI : 28 JUN 2031
Expiry Date



THE UNITED REPUBLIC OF TANZANIA CITIZEN IDENTITY CARD

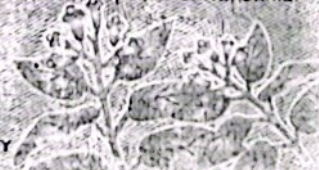


19720119531070000123

Kitambulisho hiki ni mali ya Serikali ya Jamhuri ya Muungano wa Tanzania. Huruhusiwi kukitumia mabadiliko ya ana yeyote wala kumpatia mtu ambaye haruhusiwi kukitumia. Kama kikapotea au kuharibiwa taarifa kamili lazima itolewe Kituo cha Polisi na Ofisi ya NIDA au Ofisi ya Ubaazi ya Jamhuri ya Muungano wa Tanzania iliyo karibu.

The Identity Card is the property of the Government of The United Republic of Tanzania. It should not be tampered with or allowed to pass into the possession of unauthorised person. If lost or destroyed the fact and circumstances should immediately be reported to the Local Police and the nearest NIDA office or foreign Mission of The United Republic of Tanzania.

DIRECTOR GENERAL
NATIONAL IDENTIFICATION AUTHORITY





JAMHURI YA MUUNGANO WA TANZANIA
KITAMBULISHO CHA TAIFA
THE UNITED REPUBLIC OF TANZANIA
CITIZEN IDENTITY CARD



19950413-53119-00002-27

JINA : GOODLUCK ALOYCE
Given Name

JINA LA MWISHO : LYIMO
Last Name

TAREHE YA KUZALIWA : 13 APR 1995
Date of Birth

JINSI : M
Sex

SAINI :
Signature

MWISHO WA MATUMIZI : 16 JUN 2031
Expiry Date




THE UNITED REPUBLIC OF TANZANIA CITIZEN IDENTITY CARD



19950413531190000227

Kitambulisho hiki ni mali ya Serikali ya Jamhuri ya Muungano wa Tanzania. Huruhusiwi kukitanyia mabadiliko ya aina yeyote wala kumpatia mtu ambaye haruhusiwi kukitumia. Kama kikipotea, au kuharibiwa taarifa kamili lazima itolewe Kituo cha Polisi na Ofisi ya NIDA au Ofisi ya Ubalozi ya Jamhuri ya Muungano wa Tanzania iliyo karibu.

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DIRECTOR GENERAL
NATIONAL IDENTIFICATION AUTHORITY



JAMHURI YA MUUNGANO WA TANZANIA
KITAMBULISHO CHA TAIFA
THE UNITED REPUBLIC OF TANZANIA
CITIZEN IDENTITY CARD



19941108-53115-00009-27

JINA : ADESHAE EVARISTO

Given Name

JINA LA MWISHO : MLOWE

Last Name

TAREHE YA KUZALIWA : 08 NOV 1994

Date of Birth

JINSI : M

Sex

SAINI:

Signature

A. Mlowe

MWISHO WA MATUMIZI : 27 SEP 2020

Expiry Date



THE UNITED REPUBLIC OF TANZANIA CITIZEN IDENTITY CARD



19941108531150000927

Kitambulisho hiki ni mali ya Serikali ya Jamhuri ya Muungano wa Tanzania. Huruhusiwi kukufanyia mabadiliko ya aina yoyote wala kumpatia mtu ambaye haruhusiwi kukutumia. Kama kikapotea, au kuharibiwa taarifa kamili lazima itolewe Kituo cha Polisi na Ofisi ya NIDA au Ofisi ya Ubalozi ya Jamhuri ya Muungano wa Tanzania iliyo karibu.

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Mmming

DIRECTOR GENERAL
NATIONAL IDENTIFICATION AUTHORITY

MKATABA WA MAUZIANO YA DUKA LA DAWA(TUMAINI PHARMACY)

KATI YA

Tumaini MARK MSUYA.

NA

ABISHAE-EVARISTO MLOWE
NA.

Goodluck. Aloyce. Lyimo

Mkataba huu umefanyika leo tarehe 19/02 mwezi 02 2025

Baina ya

Ndugu Tuma-ni Nkupa wa MBETA

KATA RUWANDA Wilaya MBETA mkoa MBETA

Mob. 0756678707 (Ambaye katika mkataba huu atajulikana na kisheria kama "MUUZAJI" kwa upande mmoja)

Na

Ndugu ABUSAE Mwa NA Gulluck Lyimo wa MBETA kata
ya S.SIMBA wilaya ya MBETA mkoa wa Mbeya. S.L.P
S70 MBETA Mob 0714355377 / 0752367369.

(Ambaye katika mkataba huu watajulikana kisheria kama "WANUNUZII" kwa upande mwingine.)

AMBAPO

Bila Shuruti wala Vitisho pande zote mbili zimeridhiana kwa masharti ya mkataba huu kwamba MUUZAJI ana nia thabiti ya kuuza Duka hilo, na WANUNUZII wanania thabiti ya kununua Duka hilo.

AMBAPO SASA INASHUHUDIWA KUWA

1. MUUZAJI ni mmiliki wa Duka la dawa lililopo eneo la Soweto katika halmashauri ya Ruwanda mkoa MBETA
2. MUUZAJI anakubali kuwauzia duka hili la Dawa kwa kiasi cha shilingi 25,000,000/= Ambapo wanunuzii wamelipa FEDHA zote kwa mara moja, na hawadaiwi chochote na MUUZAJI anakiri kupokea fedha zote zilizotolewa kutoka kwa WANUNUZII. Pia wanunuzi watatakiwa kuanza kulipa kodi ya chumba cha biashala kuanzia (19/02/2026) kwa kiasi cha shilingi laki mbili (200000) kwa mwezi.
3. MUUZAJI anaahidi kuwa katika kutekeleza matakwa ya mkataba huu, kuanzia leo na kuendelea Duka hilo na vilivyomo vyote ni mali ya WANUNUZII
4. MUUZAJI anawahakikishia wanunuzi kuwa Duka hilo halina madai yoyote wala mgogoro wowote na anaahidi na kushughulika kwa gharama zake mwenyewe endapo madai yatajitokeza.
5. Kwamba makubaliano hayo ni ya kudumu na yatazibana pande zote mbili na hata warithi, ndugu na wawakili wao

- 6: Kwamba mkataba huu unalindwa na sharia za Tanzania zinazohusu mikataba pamoja na ma
m,akubaliano yake yatakayojitokeza kwa mujibu wa sharia za Tanzania
7. Kwamba endapo mgogoro wowote utajitokeza kati ya pande mbili basi mgogoro huo
utatatuliwa kwa sharia za nchi zitakazo kuwepo wakati huo.

KWA KUSHUHUDIA pande zote mbili zinaweka sahihi zao leo tarehe, mwezi na mwaka kama
inavyoonekana hapa chini

UMESAINIWA na KUWASILISHWA

Hapa T. MSAFA.....

Ambaye ninamfahamu leo tarehe...19.....

Mwezi...02.....2025

MUUZAJI

MBELE YANGU:

Jina Nu.....

Saini : Nu..... Wadhifa: WAKILI

UMESAINIWA na KUWASILISHWA

Hapa ARISHAE - Mlowe na A. Mlowe.....

Hapa Goodluck. Kimo na A. Mlowe.....

Ambaye ninamfahamu leo tarehe...19.....

Mwezi...02..... 2025

WANUNUZI

MBELE YANGU

Jina PACIENEE Y. MAMUSA..... Saini Nu..... wadhifu: WAKILI

MKATABA HUU UMESHUHUDIWA PIA NA:

MASHAHIDI WA MUPUZAJI: SIMU

1. HEKIMA M. MUYA 0693-340755


Sahihi


.....

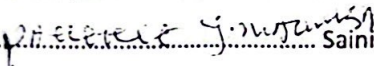
MASHAHIDI WA WANUNUZI: SIMU

Sahihi

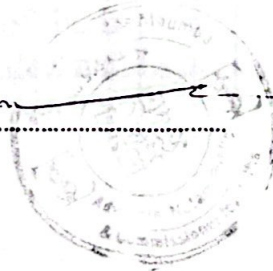
1. ELISHA JULIUS MWATONOKA 0762234693
2. HEKIMA M. MUYA 0693 340755


.....

.....

MBELE YANGU:

Jina .. Saini.....

wadhifa: WAKILI





TANZANIA

Form 5



No. 602723

Certificate of Registration

The Business Names (Registration) Act (Cap 213)

I HEREBY CERTIFY THAT **MEDIBLOOM PHARMACY** this 15th day of **APRIL** year **2025** 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 **602723** in the Index of Registration.

GIVEN under my hand at Dar es Salaam this 15th day of **APRIL**
TWO THOUSAND AND TWENTY FIVE.



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.

PARTNERSHIP DEED

This partnership agreement is effectively made this Thursday, 10th of April 2025

BETWEEN;

GOODLUCK ALOYCE LYIMO an adult resident of Mbeya city council, P.o.box 149 Mbeya, Tanzania herein referred to as Partner in one hand

AND

ABISHAE EVARISTO MLOWE an adult resident of Mbeya city council P.o.box 149 Mbeya, Tanzania here in referred to as Partner in other hand

WHEREBY IT IS AGREED AS FOLLOWS;

FORMATION AND PURPOSE

That the name of partnership will be **MEDIBLOOM PHARMACY** which is mutually formed by the parties for carrying on the business here in referred as **MEDIBLOOM PHARMACY**

- a) **PLACE OF BUSINESS;** The principal place of the partnership business will be situated at Mbeya CBD particularly at Soweto market within Mbeya CBD.
- b) **COMMENCEMENT AND DURATION;** The parties to this partnership desires to begin this partnership as soon as to the completion of the signing of this deed and for the purpose of partnership business, partners desires to begin their partnership business this
.....10..... day ofApril..... 2025.

Provided that, The Partnership will be automatically dissolved if any Partner stops being a partner by reasons of his or her death, retirement or expulsion or dissolved by partner mutually.

CAPITAL OF THE PARTNERSHIP

Parties have mutually agreed to contribute their contribution to form the whole capital of the partnership whereby

- a) Initially the capital of this partnership will be fifteen million Tanzanian shillings (15,000,000/-) whereby each partner will contribute seven million and five hundred thousand Tanzanian shillings (7,500,000/-)
- b) If at any time the partners decide to increase the capital of the partnership, the amounts of which they intend to increase will be contributed in such proportions as they may agree and deem to be fit to them.
- c) The mode by which the contribution will be held shall be decided by all partners.

PROFIT AND LOSSES

Any profit or loss for which a partnership is incurred shall be shared equally by all partners unless otherwise the further contribution of the capital of partnership as provided in clause 2 paragraph "b" of this deed is made with no equal share between, hence in such a case, any profit or loss incurred thereof shall be shared by partners depending on their share in contribution.

Provided that, if any person is a partner for only part of a partnership year, his share of any profit or loss for that partnership year will be calculated as if he had been a partner for the whole of that partnership year.

MANAGEMENT AND DECISIONS

The management and decisions in relations to this partnership shall be upon both partners provided that;

- a) Where a matter requires the decision of the Partners, such matter will be determined by the Partners by simple majority vote.
- b) The following matters require the unanimous consent of the Partners
 - i. The admission of new Partners to the Partnership.
 - ii. The alternation of the Partners' shares in profit and losses; any change to this deed; the Partnership giving a guarantee in excess of the expenditure limit.
 - iii. Changing the premises or opening new premises.
 - iv. Changing the name of the Partnership.
 - v. The partnership borrowing or lending any sum in excess of the expenditure limit.
 - vi. The acquisition or disposal of all or part of the business of the Partnership or merger with another partnership.
 - vii. Any purchase of the items of partnership in which the partnership will incur cost.
 - viii. Any change in the bank accounts.
 - ix. Any change in the business of the partnership.
 - x. The expulsion of any partner.
 - xi. Any decision to dissolve the Partnership.
- c) Meetings of the partners may be called by any of the partner but, there must be not less than 10 days notice of the meeting which shall be given to all those entitled to attend , but a meeting can be convened at shorter notice if all partners agree.
- d) The quorum for a meeting of the Partners is all the Partners.

ACCOUNTANTS, ACCOUNTS AND RECORDS

The partners shall ensure that accounting records are kept giving a true and fair view of the Partnership business.

The records shall be available for inspection by each of the partners and the accountants at any time.

The partnership accounts shall be approved by the partners and, once approved, will become binding on each of the partners except in the case of manifest errors.

BANK ACCOUNTS

The partners shall open a current account for the purposes of this deed which shall be opened in the name of this Partnership as explained in clause one above in any bank as it will be deemed by the partners and such account shall be operated by partners jointly as declared from time to time to the banks.

Provided that;

All partnership monies not required for current expenses and all cheques must be paid promptly into the Partnership bank account.

All cheques or instruction for electronic transfers of money from any account of Partnership with the Bank will be in the Partnership name.

In the case of instructions for the electronic transfer , any partner will sign written confirmation of those instructions after consultation with other partner.

PARTNERSHIP PROPERTY

Partnership property belongs to the partners in equal proportion as like their contribution to the capital of the Partnership.

INDEMNITY

Each partner shall indemnify the other partner and keep indemnified by other partners from and against all payments made and liabilities incurred by each such partner in the performance of his duties as a partner in the ordinary course of the business of the partnership or in respect of anything necessarily done by him for the preservation of the business or partnership property.

RETIREMENT OR DEATH OF PARTNER

If any partner at any time during the subsistence of the partnership, be desirous of retiring from the partnership, it shall be competent from his to do so provided he shall give at least one calendar month notice of his intention of doing so .

The remaining partner shall pay to the retiring partner or his legal representatives of the deceased partner his share in the assets of the Partnership.

In the event of the death of any partner, one of the legal representatives of the deceased partner shall become the partner of the firm and in the event the legal representative show their denial to point the firm, they shall be paid the part of the part of the purchase amount calculated as on the date of the death of the partner.

ARBITRATION

Whenever there by any difference of opinions or disputes between the partners , the partners shall first dissolve their differences or disputes amicably but in case they fail to resolve it amicably, they shall refer the same to an arbitration of one person.

Provided that, the decision of the arbitration so nominated shall be final and binding on all partners, such arbitration proceedings shall be governed by laws.

SEVERANCE

If any court or competent authority finds that any provision of this deed (or part of any provision) is invalid, illegal or unenforceable, that provision or part-provision will, to the extent required, be deemed to be deleted, and the validity and enforceability of the other provisions of this deed will not be affected.

IN WITNESS where of the parties here to have set their hands on this agreement this^{10.}..... day of April 2025.

SIGNED and DELIVERED at Mbeya

By the said GOODLUCK ALOYCE LYIMO

GL Lyimo: 10/04/2025

(Partner)

SIGNED and DELIVERED at Mbeya

By the said ABISHAE EVARISTO MLOWE

A. Mlowe 10/04/2025

(Partner)

WITNESSED BY

NAME:

Joyce F. Nkomo

SIGNATURE :

[Signature]

QUALIFICATION :

RESIDENT MAGISTRATE

MBEYA

479 MBEYA

POSTAL ADDRESS :

479 MBEYA



TANZANIA REVENUE AUTHORITY

ISO 9001: 2015 CERTIFIED

TAX CLEARANCE CERTIFICATE

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

Licensing Authority; TIN : 125-847-269

PHARMACY COUNCIL

MWENGE

31818

DAR ES SALAAM

Tax Certificate Number:

231-0243-2470

Issuing Office: Mbeya

Telephone: 025 2502165

Date of issue: 25 June 2025

Expiry Date: 31 December 2025

Taxpayer Name	TUMAINI MARK MSUYA		
Trading Name			
Taxpayer Identification Number	110-058-691	Vat Registration Number	
Company Registration Number			

Business Premises located at :

REGION : MBEYA,

DISTRICT : MBEYA,

STREET : Benki Kuu

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 retail sale in non-specialized stores
2	Retail sale of pharmaceutical and medical goods, cosmetic and toilet articles in specialized stores

Alfred T. Mregi

COMMISSIONER FOR DOMESTIC REVENUE

27 June 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.



Jamhuri ya Muungano wa Tanzania

United Republic of Tanzania

Pharmacy Council

Exchequer Receipt

Stakabadhi ya Malipo ya Serikali

Receipt No : 925181344214895

Received from : MEDIBLOOM

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 - 16209181255939790306		200,000.00

Total Billed Amount : 200,000.00 (TZS)

Bill Reference : 16209181255939790306

Payment Control Number : 991620313830

Payment Date : 2025-06-30 14:16:07

Issued by : sharon Muro

Date Issued : 2025-06-30 15:00:51

Signature : 

Government Payment Gateway © 2017 All Rights Reserved (GePG)