

FORM NO. 1
(See Rule4)
THE INDIAN PARTNERSHIP ACT, 1932

We, the undersigned being the partners of the Firm, M/S.MEDIQUEST HEALTH CARE hereby apply for registration of the said firm and for that purpose supply the following particulars in pursuance of section 58 of the Indian Partnership Act, 1932 .

The Firm name	: M/S. MEDIQUEST HEALTH CARE	
Places of Business	(a) Principal Place :Door No.25-2-134,25-2-134(1) &25-2-134(2)Mahim Complex, Kankanady Pumpwel old Road , Kankanady , Mangalore-2	
Name of partners full	Date of joining the firm	Permanent address in full
MRS.REENA T.B	07.08.2020	Flat No.1801; B'Block Northern sky City Apartment ,Ujjody ,Mangalore - 575002
SRI.RAGHAVENDRA GANGULI	07.08.2020	SRIDEVI DAYA HOUSE, POST MEENAKALYA, PANAMBUR ,Mangalore.
SRI.SAYED ABDUL REHMAN BUKHARI	07.08.2020	Flat No.102,INLAND IMPALA, Ullal Mangalore-575020

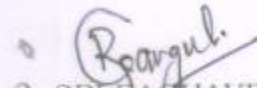
Duration of the firm : AT WILL

Station :Mangalore

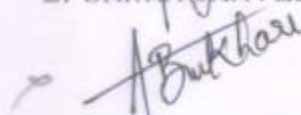
Date : 08.08.2020



1. MRS.REENA T.B



2. SRI.RAGHAVENDRA GANGULI



3. SRI.SAYED ABDUL REHMAN BUKHARI

Signature of all partners