FORM No 5A



EMPLOYEES' PROVIDENT FUND SCHEME 1952 (Please refer Para 36A)

EMPLOYEES' PENSION SCHEME 1995 (Please refer Para)

EMPLOYEES' DEPOSIT LINKED INSURANCE SCHEME1976 (Please refer Para

# (Ist RETURN OF OWNERSHIP AFTER ONLINE APPLICATION FOR CODE NUMBER)

[THIS FORM 5A HAS BEEN GENERATED BY ONLINE FILLING/ UPDATION OF FORM 5A THROUGH ECR LOGIN OF EMPLOYER. APPLICATION NUMBER IS 2801470701.]

Code Number : MHBAN1355074000

1. Name of Establishment : UPGRAD EDUCATION PRIVATE LIMITED

2. Code Number of the Establishment under EPF Scheme : MHBAN1355074000

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3. Postal address of the Establishment and its branches : NISHUVI COMPLEX, GROUND FLOOR,, DR.ANNIE BESANT ROAD, WORLI, MUMBAI, MUMBAI CITY, MAHARASHTRA - 400018 [Please see Annexure I]

4. Industry or business in which engaged

5. Date of commencement of business

: TRADING - COMMERCIAL ESTABLISHMENTS

: 10/12/2014

6. Date of closure by previous : N/A

7. Whether run by owner or lessee : Run by Owner

8. Particulars of owners

S. No.	Name	Date of Birth	Status	Father's Name	Residential Address	Position Date
1	Mr. MAYANK KUMAR	18/12/1982	MANAGING DIRECTOR	NARENDRA KUMAR	ROOM NO 302 3 RD FLOOR RAMESHWARAM APT CHS LTD KASHINATH DHURU MARG MUMBAI 400028	13/02/2015
2	Mr. ROHINTON SCREWVALA	08/09/1956	DIRECTOR	SOLI SCREWWALA	FLAT NO 11 BREACH CANDY HOUSE 5 TH FLOOR 68 BHULABHAI DESAI ROAD MUMBAI 400026	13/02/2015
3	Mr. TRISHYA SCREWVALA	12/11/1986	DIRECTOR	ROHINTON SCREWVALA	502, BAKHTAVAR, SHAHID BHAGAT SING ROAD, COLABA, MUMBAI-400005	13/02/2015

9. In case on lease, particulars of lessee : N/A

S.No.	Name	Date of Birth	Father's Name	Residential Address	Position Date
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10. If registered under Factories Act, particulars of Manager or

: N/A

11. Particulars of persons mentioned above who are incharge and responsible for conduct of business of the

S. No.	Name	Date of Birth	Status	Father's Name	Residential Address	Position Date
1	Mr. MAYANK KUMAR	18/12/1982	MANAGING DIRECTOR	NARENDRA KUMAR	ROOM NO 302 3 RD FLOOR RAMESHWARAM APT CHS LTD KASHINATH DHURU MARG MUMBAI 400028	13/02/2015
Date:				Signature of empl	oyer	
	Name of Employer					
	Designation of Employer					
Seal of Establishment			Mobile nur	nber		

Signature of employer at serial number of Owners details, if more than one employer. Signature of remaining employers:

Signature	Signature
Name	Name
Signature	Signature
Name	Name
Signature	Signature
Name	Name
Signature	Signature
Name	Name

## ANNEXURE - I

#### **Details of Branches of the Establishment**

S. No.	Branch Name	Address	State - Pincode	Branch Type	Employees	Status	Status Updated
1	UPGRAD EDUCATION PVT LTD	GROUND FLOOR NISHUVI 75 DR ANNIE BESANT ROAD WORLI MUMBAI 400018, MUMBAI CITY	MAHARASHTRA - 400018	HEAD OFFICE	225	Working	
2	UPGRAD EDUCATION PVT LTD	139, FIRST CROSS ROAD, V BLOCK, A CROSS ROAD, KORAMANGALA, BANGALORE, KARNATAKA 560095, BENGALURU (BANGALORE) URBAN	KARNATAKA - 560095	BRANCH	51	Working	

## **ANNEXURE - II**

## List of Branches having Separate/ Sub Code Number

#### SPECIMEN SIGNATURE CARD

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To be submitted with	all documents after t	the Code number is allotted	I through the online application.

FULL NAME OF THE AUTHORISED	SIGNATORY	
Name of Establishment : UF	PGRAD EDUCATION PRIVATE LIMITED	
Address of the Establishment : NISHU MUMBAI CITY, MAHARASHTRA - 40	JVI COMPLEX, GROUND FLOOR,, DR.ANNIE BESANT ROAD, W 00018	ORLI, MUMBAI,
Code Number of the	: MHBAN1355074000	
STATUS OF THE SIGNATORY : # EN	MPLOYER / AUTHORISED SIGNATORY	
# Strike whichever is not applicable		
	SPECIMEN SIGNATURE 1	
	2	
	3	
SPECIAL INSTRUCTION, IF ANY		-
SPECIMEN SIGNATURE OF Mr/Ms	i	ATTESTED
	Signature of employer	
	Name of Employer	
	Designation of Employer	
Seal of Establishment	Mobile number	
[] Please tick if "Not Applicable" due to	o upload of digital signature	

To be submitted separately for each Authorised Officer, if more than one.

Not to be submitted in this format if the employer after allotment of code number has uploaded digital signatures of the Authorised signatories.

In such case the letter generated from the portal after uploading the digital signature(s) to be sent.

In case of upload of digital signature, when page (6) specimen signature card is not applicable, strike this, but keep as enclosure to the form 5A.