Mukand Engineers Limited

Kalwe Works : Thane-Belapur Road, Post Office Kalwe, Thane, Maharashtra

India 400 605.

Tel: 91 22 2172 7500 / 7700 F: 91 22 2541 0291

E: mel@mukand.com

Regd Office: Bajaj Bhavan, Jamnalal Bajaj Marg, 226 Nariman Point, Mumbai, India 400 021. www.mukandengineers.com

CIN L45200MH1987PLC042378

31st May, 2022

1	Bombay Stock Exchange Ltd.	2	National Stock Exchange of India Ltd.
	Department of Corporate Services		Exchange Plaza, Plot No. C/1, G Block,
	Phiroze Jeejeebhoy Towers,		Bandra-Kurla Complex,
	Dalal Street,		Bandra East, Mumbai- 400051
	Mumbai- 400021		
	BSE Scrip Code: 532097		NSE Scrip Name: MUKANDENGG

Sub: Effective Date for the Scheme of Amalgamation amongst Adore Traders & Realtors Private Limited (Amalgamating Company 1); Mukand Global Finance Limited (Amalgamated Company 1 / Amalgamating Company 2); Mukand Engineers Limited (Amalgamating Company 3) with Mukand Limited (Transferee Company And Amalgamated Company 2) and their respective shareholders and creditors, under the provisions of Sections 230 to 232 of the Companies Act, 2013 (Scheme of Amalgamation).

Dear Sirs,

Further to our letter dated May 30, 2022, this is to inform that the Company has filed certified copy of Order of NCLT pronounced on April 29, 2022, sanctioning Scheme of Amalgamation, along with Form INC-28 with the Registrar of Companies, today i.e. on May 31, 2022 and the Scheme of Amalgamation has become effective.

This is for your information and records please.

Thanking You,

Yours faithfully,

For Mukand Engineers Limited

RADHAKRI Digitally signed by RADHAKRISHNAN SANKARAN SANKARAN SANKARAN 13:41:49 +05'30'

R. Sankaran Director (DIN - 00381139)



FORM NO. INC-28

[Section 12(6), 13(7), 58(5),87, 111(5),66(1), 230, 232, 233, 234, 237, others of the Companies Act, 2013 and section107(3), 81(4), 167, 186, 391, 394,396,397, 398, 445, 481, 466, 518, 559 & 621A ,others of the Companies Act, 1956]



Notice of Order of the Court or Tribunal or any other competent authority

Form Language • English	Hindi			
Refer instruction kit for filing the for	rm.			
*Corporate identity number registration number (FCRN)		L45200MH1987PL	.C042378	Pre - Fill
(b) Global location number (GL	₋N) of company			
2.(a) Name of the company	MUKAND ENGINEERS	LIMITED		
(b) Address of the registered office of the company or of the principal place of business in India of the company	BAJAJ BHAWAN 3RD F 226 NARIMAN POINT MUMBAI Maharashtra 400021 India	FLOOR		
(c) e-mail ID of the company				
3.(a) *Order passed by	NCLT			
(b)*Name of the court or or Tr	ibunal or any other comp	etent authority		
NATIONAL COMPANY LAW TR	RIBUNAL			
(c) *Location NATI (d) *Petition or application num C.P. (C.A.A.)/4688/MB/2019	ONAL COMPANY LAW	TRIBUNAL, MUMBAI	BENCH, COURT II	
(e) *Order number				
C.P. (C.A.A.)/ 4684, 4685, 4688,	, 4689/MB/2019			
4. *Date of passing the order		D/MM/YYYY)		
5.(a) (i) Section of the Companie	es Act,2013 under which	order passed 23	32 - Amalgamation	
(ii)Section of the Companie	es Act,1956 under which	order passed		
(iii)Section of Insolvency ar	nd Bankruptcy Code, 201	6 under which order p	passed	
6. *Number of days within which entered pursuant to aforesaid order or order of the competer	sections or in terms of co	ourt order or Tribunal	30	
7. *Date of application to court o issue of certified copy of orde		ent authority for	05/05/2022	(DD/MM/YYYY)
8. *Date of issue of certified cop	y of order	24/05/2022	(DD/MM/	(YYY)
9. Due date by which order is to	be filed with Registrar	17/06/2022	(DD/MM/	(YYY)

11.	In case of amalgamation	, mention whether	company filing the	he form is transfero	or or transferee	Tran	sferor (Transferee

(b) Details of transferee company

CIN/FCRN	L99999MH1937PL	.C002726	Pre-fill
Name	MUKAND LIMITED		
Appointed date of amalgamation		01/04/2019	DD/MM/YYYY)

13.(a) SRN of relevant form		
(Mention the SRN of relevant Form INC-23 applicable)	3, INC-28, CHG-1, CHG-4, (CHG-9, MGT-14 or any other form; if
14. *Whether penalty involved or not	Yes No	
Attachments		MEL NCLT Order.pdf
1. *Copy of court order or NCLT or CLB or order by any other competent authority.	Attach	
2. Optional attachment(s) - if any	Attach	
		Remove attachment

Declaration

Dated * 12/08 and rules there been compiled v 1. Whatever is information mate original records	by the Board of Directors of the Company vide resolution no.* [3/2015] to sign the form and declare that all the requirements of the companies Act,2013 eunder in respect of the subject matter of this form and matters incidental thereto have with. I further declare that: stated in this form and in the attachments thereto is true ,correct and complete and no erial to the subject matter of this form has been suppressed or concealed and is as per the maintained by the company ed attachments have been completely and legibly attached to this form				
*To be digitally	- ISTINAN ALCOHOLD				
*Name	SANKARAN RADHAKRISHNAN				
Capacity					
*Designation	Director				
DIN or Income-t	tax PAN or Membership number 00381139				
	Certificate by practicing professional				
the subject mat attachment(s)) f them to be true, Chartered as	tified that I have gone through the provisions of the Companies Act, 2013 and Rules thereunder for the original records maintained by the Company which is subject matter of this form and found correct and complete and no information material to this form has been suppressed. Indeed, in whole-time practice) or material to the company which is subject matter of this form and found the correct and complete and no information material to this form has been suppressed. Indeed, in whole-time practice) or material to the company which is subject matter of this form and found the company which is subject matter of this form and				
Company secretary (in whole-time practice) ARORA 1027/24-46337 ARORA 1027/24-46337					
*Whether associate or fellow Associate Fellow					
*Membership nu	tumber 10378 *Certificate of practice number 13609				
	is drawn to provisions of Section 448 and 449 which provide for punishment for t/certificate and punishment for false evidence respectively.				
Modify	Check Form Prescrutiny Submit				
For office use only:					
eForm Service request number (SRN) eForm filing date (DD/MM/YYYY)					
This e-Form is hereby registered					
Digital signatu	Digital signature of the authorising officer Confirm submission				
Date of signing	(DD/MM/YYYY)				