

FORM A

PUBLIC ANNOUNCEMENT

*(Regulation 14 of the Insolvency and Bankruptcy Board of India
(Voluntary Liquidation Process) Regulations, 2017)*

**FOR THE ATTENTION OF THE STAKEHOLDERS OF
WDB MEDICAL DATA INDIA PRIVATE LIMITED**

1.	NAME OF CORPORATE PERSON	WDB MEDICAL DATA INDIA PRIVATE LIMITED
2.	DATE OF INCORPORATION OF CORPORATE PERSON	6 th March 2018
3.	AUTHORITY UNDER WHICH CORPORATE PERSON IS INCORPORATED/ REGISTERED	REGISTRAR OF COMPANIES, BANGALORE, MINISTRY OF CORPORATE AFFAIRS
4.	CORPORATE IDENTITY NUMBER / LIMITED LIABILITY IDENTITY NUMBER OF CORPORATE PERSON	U74999KA2018FTC110742
5.	ADDRESS OF THE REGISTERED OFFICE AND PRINCIPAL OFFICE (IF ANY) OF CORPORATE PERSON	1ST FLOOR, GOPALA KRISHNA COMPLEX, 45/3 RESIDENCY ROAD MG ROAD SHANTHALA NAGAR ASHOK NAGAR, BANGALORE, KARNATAKA, INDIA, 560025
6.	LIQUIDATION COMMENCEMENT DATE OF CORPORATE PERSON	27 th March 2024
7.	DETAILS OF LIQUIDATOR NAME ADDRESS EMAIL ADDRESS TELEPHONE NUMBER REGISTRATION NUMBER OF THE LIQUIDATOR	MS. MEDHA KULKARNI D-301, ADMIRALTY SQUARE, 13 CROSS, 6 MAIN, INDIRANAGAR, BANGALORE 560038 wdbmedicaldata@gmail.com. 9945180862 IBBI/IPA-001/IP-P00121/2017-2018/10263
8.	LAST DATE FOR SUBMISSION OF CLAIMS	26 th April 2024

Notice is hereby given that the WDB Medical Data India Private Limited has commenced voluntary liquidation on 27th March, 2024.

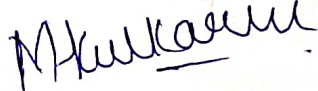
The stakeholders of WDB Medical Data India Private Limited are hereby called upon to submit a proof of their claims, on or before 26th April 2024, to the liquidator at the address mentioned against item 7.

The financial creditors shall submit their proof of claims by electronic means only to wdbmedicaldata@gmail.com. All other stakeholders may submit the proof of claims in person, by post or by electronic means. Submission of false or misleading proofs of claim shall attract penalties.

Name and Signature of the Liquidator: Ms. Medha Kulkarni

Date: 1st April 2024

Place: Bangalore


MEDHA KULKARNI
IP Reg. No. IBBI/IPA-001/IP-P00121/
2017-2018/10263