SCHEDULE I

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 RAAJEEVAN HOSPITALS PRIVATE LIMITED

1.	NAME OF CORPORATE PERSON	RAAJEEVAN HOSPITALS PRIVATE LIMITED
2.	DATE OF INCORPORATION OF CORPORATE PERSON	21/08/1987
3.	AUTHORITY UNDER WHICH CORPORATE PERSON IS INCORPORATED/ REGISTERED	Incorporated Under The Companies Act, 1956 ROC, Andhra Pradesh
4.	CORPORATE IDENTITY NUMBER OF CORPORATE PERSON	CIN : U85110AP1987PTC007710
5.	ADDRESS OF THE REGISTERED OFFICE AND PRINCIPAL OFFICE (IF ANY) OF CORPORATE PERSON	NRI PLOT NO.1, Seethammadhara, Visakhapatnam Andhra Pradesh 530013 IN
6.	LIQUIDATION COMMENCEMENT DATE OF CORPORATE PERSON	17-04-2021
7.	NAME, ADDRESS, EMAIL ADDRESS, TELEPHONE NUMBER AND THE REGISTRATION NUMBER OF THE LIQUIDATOR	CA.Yugandhara Babu Lella, Chartered Accountant & Insolvency Professional Address : 12-7-134, Villa 52, Mystic Hills, Green Hills Road, Anjaneyanagar, Moosapet HYDERABAD-500 018 Email : rajeehospitals21@gmail.com Tel : 040-49505252 Mobile: 9871229999 Regn. No. IBBI/IPA-001/P00912/2017-2018/11518
8.	LAST DATE FOR SUBMISSION OF CLAIMS	16-05-2021

Notice is hereby given that the M/s.Raajeevan Hospitals Private Limited has commenced Voluntary Liquidation on 17-04-2021.

The stakeholders M/s.Raajeevan Hospitals Private Limited are hereby called upon to submit a proof of their claims, on or before 16-05-2021, to the liquidator at the address mentioned against item 7.

The financial creditors shall submit their proof of claims by electronic means only. 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 & Signature of Liquidator: Yugandhara Babu Lella

Date : 22-04-2021

Place: HYDERABAD

CA YUGANDHARA BABU LELLA ★ INSOLVENCY PROFESSIONAL ★ Regd.No: IBBI/IPA-001/IP-P00912/2017-2018/11518