



Regd. & Corporate office:
Plot No: 19-III, Road No. 71,
Opp. Bharatiya Vidya Bhavan Public School,
Jubilee Hills Hyderabad – 500 096, Telangana, INDIA,
Tel.: +91- 40-6628 8888; Fax: +91-40-23551402
CIN: L24239AP1987PLC008066
Email: info@smspharma.com, www.smspharma.com

To
M/s Aarthi Consultants Pvt. Ltd.
1-2-285, Domalguda,
Hyderabad – 500029,
Telangana State, India.
Phones: 040-27638111/27634445/27642217

Date: _____

Dear Sirs,

Company: SMS Pharmaceuticals Limited

Request for registering Change of Address

We would request you to record and register the change of address and our email ID as follows:

- 1) FOLIO NO/CLIENT ID: _____ DP ID: _____
- 2) EMAIL ID: _____
- 3) CONTACT: Mobile: _____ Landline: _____
- 4) NEW ADDRESS: _____

Pin code: _____ State: _____

I am enclosing a self-attested/notarized copy of the following document as evidence of my change of address.

Please provide any one of:

- | | | |
|-----------------------------|---------------------------|---------------------|
| 1. Voter Identity Card; | 4. Passport; | 7. Driving License; |
| 2. Latest Electricity Bill; | 5. Bank Pass Book; | 8. Ration Card; |
| 3. Latest Telephone Bill; | 6. Post office Pass Book; | 9. AADHAR Card. |

Yours faithfully

(Signature of Shareholder)

(Signature of Shareholder)

(Signature of Shareholder)

Name:

Name:

Name:

NOTE: Signature of shareholders should be as per specimen recorded with the Company