NOTICE

NOTICE is hereby given that the Fifth Annual General Meeting of the Members of Open Source Pharma Foundation will be held on Tuesday, the 30th November, 2021 at 8.00 a.m. through Video Conference in compliance of the applicable provisions of the Companies Act, 2013, General Circular No. 14/2020 dated April 8, 2020, General Circular No. 17/2020 dated April 13, 2020, General Circular No. 20/2020 dated May 5, 2020 and General Circular No. 02/2021 dated January 13, 2021 issued by Ministry of Corporate Affairs.

The details for accessing and participating in the meeting through video conference are as follows:
https://zoom.us/j/6161819790?pwd=TldjZmlLMDBHUWM4aTFTWGJNV29XUT09

The designated email address of Open Source Pharma Foundation is info@ospfound.org for the members to convey their votes, when a poll is required to be taken during the meeting on any resolution. The helpline number for members who need assistance with the technical difficulties related to video conferencing is 9880193120.

The following items of business shall be transacted at the Annual General Meeting:

ORDINARY BUSINESS:

1. To consider and approve audited Financial Statements for the year ended 31st March, 2021 and the report of the Auditors and Directors, thereon.

For and on Behalf of the Board of Directors of
Open Source Pharma Foundation

_____
Jaykumar Arvindakshan Menon
Managing Director
DIN: 07229174
Address: 243 Riverside Dr Apt 705,
New York NY 100256188 US

Date: 29th November, 2021
Place: New York

NOTES:

(a) Attendance Slip is enclosed herewith.

ATTENDANCE SLIP FOR FIFTH ANNUAL GENERAL MEETING
OF
OPEN SOURCE PHARMA FOUNDATION

Date: 30th November, 2021   **Time:** 8.00 a.m.

Venue: Though Video Conference

Name and Registered address
of Sole / First named member   :

Name(s) of Joint Holders, if any   :

Ledger Folio / DP ID & Client ID No.   :

Number of Shares held   :

Please tick in the box □ Member □ Proxy   :

                                           _____
                                           Member's Signature

_____   _____

Name of the Proxy in Block Letter   Proxy's Signature