



# Kas Medics Limited

*Your Partner in Progressive healthcare!*

20.2.2020.

MANAGING DIRECTOR,  
KAS BIOTECH LIMITED,  
P.O BOX 7856,  
DAR ES SALAAM,  
TANZANIA.

Dear Sir/ Maadam

**REF: USE OF WAREHOUSE No. GF 09.**

Refer to the heading above,


KAS MEDIC LIMITED have a lease agreement with THE FEDERATION OF KHOJA SHIA ITHNA ASHERI JAMAATS OF AFRICA for Umoja complex warehouse unit No. GF 09 with Certificate Title No.18809.

KAS MEDIC LIMITED has agreed KAS BIOTECH LIMITED to use the warehouse for the period of the agreement.

Attached is the copy of the contract, withholding tax and stamp duty payment.

Yours faithfully,

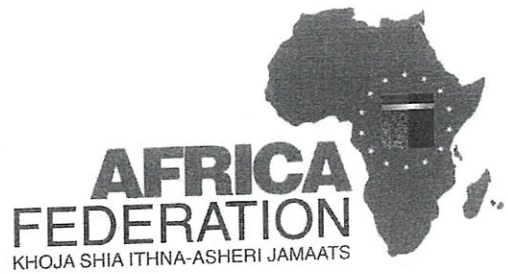
For: KAS MEDICS LIMITED

  
NAVEEN KUCKIAN

DIRECTOR

**KAS MEDICS LTD.  
P. O. Box 7856  
DAR ES SALAAM  
TANZANIA**

P.O. BOX 6710  
Dar-es-Salaam, Tanzania  
Tel: + 255 22 2150897  
Fax: + 255 22 2150964  
secretariat@africafederation.org  
www.africafederation.org



**Our Ref:** AFED/UC/20

**Date:** September 30, 2020

Mr. Navin  
Kas Medics Ltd,  
**Dar-es-Salaam**

Dear Mr. Navin.

**Re: Umoja Complex Warehouse – Plot No 11 – Vingunguti Industrial Areas –  
Unit No GF 09**

Reference to the signed Lease between our Organization (The Federation of Khoja Shia Ithna-Asheri Jamaats of Africa) and your Company (Kas Medics), we wish to confirm the following:

- The said Lease is being extended for a further period of three Years (i.e 1<sup>st</sup> June 2021 to 30<sup>th</sup> May 2024)
- All other clauses stipulated in the signed Lease remain unchanged.

We thank you for your assistance and support.

Ahmed Alfoo  
Senior Accountant

**LEASE AGREEMENT**

**BETWEEN**



**THE REGISTERED TRUSTEES OF THE FEDERATION OF KHOJA  
SHIA ITHNA-ASHERI JAMAATS OF AFRICA**

**AND**

**KAS MEDICS LIMITED**

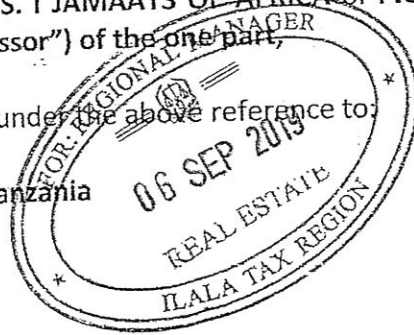
**In respect of Ground Floor of  
Umoja Complex Warehouse  
Unit No. GF 09,  
Plot No. 11, Vingunguti Industrial Area,  
Nyerere Road, Dar es Salaam,  
Tanzania**

**Certificate Title No. 18809**

We, REGISTERED TRUSTEES OF THE FEDERATION OF K. S. I JAMAATS OF AFRICA of P.O. Box 6710, Olimpio Street, Dar es Salaam (Hereinafter called "the Lessor") of the one part,

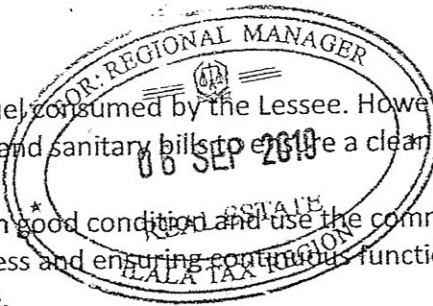
HEREBY AGREE to lease the right of occupancy registered under the above reference to:

KAS MEDICS LIMITED of P. O. Box 7856, Dar es Salaam, Tanzania  
(Hereinafter called "the Lessee") of the other part.



1. **DESCRIPTION OF THE LAND TO BE DEMISED:**  
Ground Warehouse GF 09, Umoja Complex, Dar es Salaam, Tanzania.  
(Herein referred to as "Premises")
  2. **DURATION/TYPE OF LEASE:**  
24 Months: From 16<sup>th</sup> August, 2019 to 31<sup>st</sup> August, 2021
  3. **PURPOSE OF LEASE:** Commercial
  4. **DATE OF EXECUTION OF THE LEASE:** 16<sup>th</sup> August, 2019
  5. **DATE OF DELIVERY OF POSSESSION OF THE DEMISED LAND TO THE LESSEE:**  
16<sup>th</sup> August, 2019
  6. **RENT COMPUTATION**
    - a) **TOTAL SQUARE METERS PER WAREHOUSE:** 570 Sq. Mts
    - b) **RENT PER SQUARE METER:** US \$5.25
    - c) **TOTAL RENT PER MONTH EXCLUDING TAXES:** US \$2,992.5
    - d) **TOTAL RENT INCLUSIVE VAT:** US \$3,531.15
    - e) **MODE OF PAYMENT OF RENT:** QUARTERLY IN ADVANCE
- **PROVIDED THAT,** any deductions of statutory payments including withholding Tax must be made by the Lessee where relevant and remit to the Tanzania Revenue Authority and also provide the Lessor with a copy of the Receipt within 15 days of each payment made for warehouse rent.

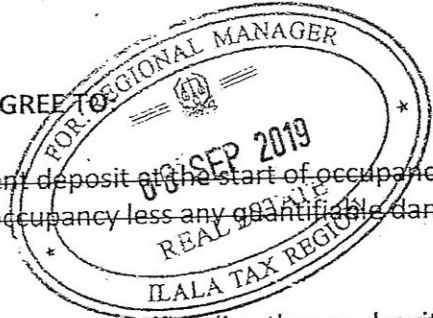
## 7. COVENANTS BY LESSEE TO THE LESSOR

- 
- i) To pay to Rent with VAT.
  - ii) To reimburse Electricity and Generator Fuel consumed by the Lessee. However, Lessee will be responsible for paying for his own refuse and sanitary bills to ensure a clean environment.
  - iii) To maintain the interior of the premises in good condition and use the common areas in appropriate manner maintaining cleanliness and ensuring continuous functioning of systems including plumbing system and lift service.
  - iv) To operate in the existing lawful line of business without causing any annoyance to the neighbors nor pose a threat of fire or risk to one's own property or to the premises such as storing of harmful or hazardousness materials.
  - v) To fully operate the lease and not to sublease to another party or cease contract during occupancy without a prior notice.
  - vi) Not to make any alteration to the premises without written permission from the Lessor. The Lessor may check the interior of the premises from time to time but with prior written notice of two days and hold lessee accountable to any damages observed due to negligence or otherwise.
  - vii) Not to use the exterior walls or windows for advertisements or placard signs unless permitted by the Lessor in writing.
  - viii) To ensure no obstruction is caused to the pathways during loading and off-loading of goods and sufficient safety precautions have been taken for one's own goods for which the Lessor is in anyway liable.
  - ix) Lessee is responsible to insure the goods and equipment's stored in the premises.

## 8. COVENANTS BY LESSOR TO THE LESSEE

- i) To pay for all for all charges as Landlord such as Land Rent and Taxes.
- ii) To insure the building from fire and other perils.
- iii) To ensure continuous supply of water to all common areas.
- iv) To hand down to the lessee the agreed premises in good condition
- v) To ensure a peaceful operational environment without any interruptions at any point of time.

9. THE LESSOR AND THE LESSEE MUTUALLY AGREE TO:



- i) Lessee to pay the Lessor one month's rent deposit at the start of occupancy which will be refundable to the Lessee at the end of occupancy less any quantifiable damage to the premises caused by the Lessee.
- ii) To allow parking of trucks only during loading and offloading the goods without causing any obstruction to other warehouse or pathways.
- iii) Lessee will indemnify the Lessor against any damage caused to any area of the Premises by Lessee, their employees or agent and remain responsible to repair the damages or penalties.
- iv) If the Lessee fails to pay any amount due to the Lessor, then the Lessor has to right to seize any property of the Lessee at any given time and to liquidate the property or hold it in custody until such a time when the balance is paid.
- v) Any further matter arising in connection to this lease will be governed by Tanzanian laws which both parties are required to adhere to.
- vi) All notices provided for any reason including termination of lease must be in writing and will be deemed complete if it has been sent through the registered mail service to the official postal address of the concerned party indicated in this lease.
- vii) The **Stamp Duty** arising out of this Lease will be paid by the lessee as provided by the Stamp Duty Act 1972 or any other legislation charges to be enacted which will require the lessee to pay similar taxes or levies.
- viii) Municipal Council charges like garbage collection and any other such charges will be paid by the lessee.
- ix) In the event the Lessee vacates the premises, the said warehouse will be put in its original state in consultation with the lessor or a compensation will be paid to implement the necessary requirements of bringing the warehouse to its suitable condition.

10. REVIEW OF LEASE

Any change to the current lease will be notified to the Lessee prior to execution of the new changes.

11. THE LESSOR AND THE LESSEE MUTUALLY AGREE TO:

- i) **3 months'** written notice by either party.
- ii) A minimum lease period of **one year** will apply from the start of this lease whereby no termination notice will be applicable.

IN WITNESS WHEREOF the parties to the Agreement have sealed and executed these presents on the day and year and in the manner herein below appearing.



SIGNED and DELIVERED for and on behalf of LESSOR: this 05 day of August 2019

LESSOR: MEHBOOB VERSI

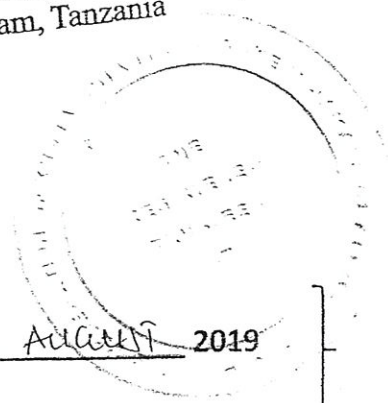
Position: TRUSTEE

Signature: [Handwritten Signature]

The Federation of K. S. I.  
Jamaats of Africa  
P. O. Box 6710  
Dar es Salaam, Tanzania

Witness: AHMED ALLOO

Signature: [Handwritten Signature]



SIGNED and DELIVERED for and on behalf of LESSEE: this 05 day of August 2019

LESSEE: NAVEEN KUCKIAN

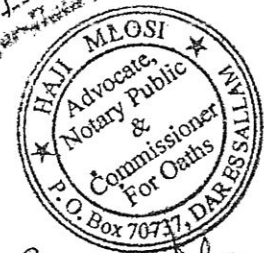
Position: DIRECTOR

Signature: [Handwritten Signature]

MAS MEDICS LTD  
P. O. Box 7856  
DAR-ES-SALAAM  
STAMP DUTY Collected  
Shts: 826/74.19  
Receipt No: 2046980 Date: 10/09/19

WITNESS: GERALD KANZA

Signature: [Handwritten Signature]



s/duty = 359.1 \$  
w/tax = 897.75 \$  
1256.85 \$

08/09/2019  
r/rate: 2300.68  
Tshs: 2,891,609.658

Before Me  
[Handwritten Signature]  
08/09/19



Control No: 20863111

**TANZANIA REVENUE AUTHORITY**

**Commissioner for Domestic Revenue - Ilala Tax Region**

**Order Form for Electronic Funds Transfer to Bank of Tanzania**

Name of Account Holder(s): KAS MEDICS LIMITED

Bank Account Number: 010009144201

Name of Commercial Bank: I & M BANK LTD

Please transfer from my/our account the amount of **TZS 1,045,879.75**

Amount in Words: ONE MILLION AND AND HUNDRED FOURTY FIVE THOUSAND EIGHT HUNDRED SEVENTY NINE AND SEVEN FIVE CENTS ONLY

Value Date: 08/11/2019 {DD/MM/YYYY}

To: Commissioner for Domestic Revenue - Ilala Tax Region

**Tanzania Revenue Authority**

**Bank of Tanzania**

Account Number: 9921134701

SWIFT Code: TARATZTZ



Details of Payment (field 70 of MT103): /ROC/20863111

Sender to Receiver Info (field 72 of MT103): /REC/100107724

**TAX INFORMATION FOR WHICH PAYMENT IS APPLICABLE (For TRA use only)**

KAS MEDICS LIMITED  
W11121119A1045879.75Q1Y2019

**KAS MEDICS LTD**  
**P. O. Box 7856**  
**DAR-ES-SALAAM**

Signature Date 08/11/2019

Signature Date 08/11/2019

Note to Commercial Bank:

1. Please capture the above information correctly.
2. Field 70 of MT103 carries a payment control number, must be captured correctly.
3. Field 72 of MT103 carries a TIN, must be captured correctly.

Bank use only  
Reference number



Control No:

20469801

**TANZANIA REVENUE AUTHORITY**

**COMMISSIONER FOR DOMESTIC REVENUE – TAXBANK**

**TAX PAYMENT SLIP**

Name of Account Holder(s): *N/A Kas Medics Ltd*  
 Bank Account Number: *N/A 56010030004704*  
 Name of Commercial Bank: *N/A United Bank for Africa (T) Ltd*

Please transfer from my/our account the amount of **TZS 2,891,609.66**

Amount in Words: TWO MILLION EIGHT HUNDRED NINETY ONE THOUSAND SIX HUNDRED NINE AND SIX SIX CENTS ONLY

Value Date: 09/09/2019 {DD/MM/YYYY}

To: COMMISSIONER FOR DOMESTIC REVENUE – TAXBANK

Tanzania Revenue Authority

UNITED BANK FOR AFRICA (T) LTD

Account Number: 56010070000034

Details of Payment: 20469801

TIN: 100107724

**TAX INFORMATION FOR WHICH PAYMENT IS APPLICABLE (For TRA use only)**

KAS MEDICS LIMITED

D11610127A826174.19Y2019

W11121119A2065435.47Q1Y2019

**KAS MEDICS LTD  
P. O. Box 7856  
DAR-ES-SALAAM**

Signature *[Signature]* Date *06/09/2019*

Signature *[Signature]* Date *06/09/2019*

Note to Commercial Bank:

Please capture the above information correctly.

