

SCHEDULE - II
FORM - V
PROFORMA FOR PRICE LIST
(See paragraphs 2(x),24,25,26)

1. Name and address of the manufacturer / importer / distributor :

Softech Pharma Private Limited, Add :Plot No 708 & 6 Behind Somnath Temple Somnath Road Dabhel Nani Daman Daman 396215,Daman,,The Dadra And Nagar Haveli And Daman And Diu,396215

2. Name and address of the marketing company, if any :

CENTAUR PHARMACEUTICALS PRIVATE LIMITED, Add :CENTAUR HOUSE, NEAR GRAND HYATT, VAKOLA, SANTACRUZ (E),MUMBAI,Mumbai Suburban,Maharashtra,400055

| TABLE-A | | | | | | | | | | |
|---------|--|---|--------------|-----------------|--|---|---|---|---|---------------------|
| Sl. No. | Name of the Product(Formulation and its dosage forms) | Composition as approved by Drug Control Authorities | Pack Size | GST rate (in %) | Price to Distributor (excluding taxes) (Rs.) | Price to retailer (excluding taxes) (Rs.) | Pre-revised Maximum Retail Price, if any (incl. of all taxes) (Rs.) | Maximum Retail Price (incl. of all taxes) (Rs.) | Batch no. and date from which price revision is effective | Production Capacity |
| (1) | (2) | (3) | (4) | (5) | (6) | (7) | (8) | (9) | (10) | (11) |
| | Scheduled formulations | | | | | | | | | |
| | Own Manufactured Formulations | | | | | | | | | |
| | Purchased Formulations | | | | | | | | | |
| 1 | D Boost Softgel 4(4.00 Capsule) (Vitamin D3 (Cholecalciferol) SOFTGEL) | Vitamin D3 (Cholecalciferol) 60000 IU SOFTGEL | 4.00 CAPSULE | 12.00 | 99.36 | 108.00 | 137.89 | 140.31 | SP007 & Apr-2025 | 1000000 |
| | Imported Formulations | | | | | | | | | |

| TABLE-B | | | | | | | | | | |
|---------|---|---|-----------|-----------------|--|---|---|---|---|---------------------|
| Sl. No. | Name of the Product(Formulation and its dosage forms) | Composition as approved by Drug Control Authorities | Pack Size | GST rate (in %) | Price to Distributor (excluding taxes) (Rs.) | Price to retailer (excluding taxes) (Rs.) | Pre-revised Maximum Retail Price, if any (incl. of all taxes) (Rs.) | Maximum Retail Price (incl. of all taxes) (Rs.) | Batch no. and date from which price revision is effective | Production Capacity |
| (1) | (2) | (3) | (4) | (5) | (6) | (7) | (8) | (9) | (10) | (11) |
| | Non-Scheduled formulations | | | | | | | | | |
| | Own Manufactured Formulations | | | | | | | | | |
| | Purchased Formulations | | | | | | | | | |
| | Imported Formulations | | | | | | | | | |

Notes:-In case of purchased/imported formulation, Name of the manufacturer shall be indicated.

The information furnished above is correct and true to the best of my knowledge and belief.

Place : Mumbai

Date : 03-Apr-2025

Authorized Signatory : DR AMIT RANGNEKAR

Name : DR AMIT RANGNEKAR

Designation : VP SCM

Mobile : 9820027699

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