

**FORM TM- A**  
**The Trade Marks Act, 1999**  
**Application For Registration Of a Trademark**

**On application to register a trade mark for a specification of goods or services included in one class [section 18(1)]**

**Temp. Ref. No: 12444103**

NATURE OF APPLICATION:	A TRADE MARKS APPLICATION	
APPLICATION FILED AS:	Small Enterprise	
FEE:	4500	
<b>APPLICANT</b>		
Applicant No.	1	
Name	HEDYA PHARMA PRIVATE LIMITED	
Address	Room-1, Babu Bhai Chawl, Old CST Road, Kalina, Santacruz P&t Colony, Mumbai, Maharashtra, India, 400029	
Country	India	
Jurisdiction	MUMBAI	
Address for Service	c/o- Jatindra Kumar Pati, Bijayramchandrapur, w.n-17,Baripada-2,Mayurbhanj-757002,Odisha	
Mobile No.		
Email Address	ipindia.attorney@gmail.com	
Nature of Applicant	Body Incorporate	
Legal Status	An Indian Private Limited Company	
<b>APPLICANT'S AGENT (If Any):</b>		
Name	ABHISHEK PATI	
Address	c/o- Jatindra Kumar Pati, Bijayramchandrapur, w.n-17,Baripada-2,Mayurbhanj-757002,Odisha	
Nature of Agent	Advocate	
Registration No.		
<b>MARK DETAILS</b>		
Category of Mark	WORD	
Trade Mark	CalciMag	
Image Description		
<b>IF MARK IN A LANGUAGE OTHER THAN HINDI OR ENGLISH</b>		
Language	English	
<b>CONDITIONS OR LIMITATIONS TO USE THE TRADEMARK, IF ANY</b>		
<b>CLASS OF GOODS OR SERVICE</b>		
Class: 5	Description: Pharmaceuticals and medical preparations.	

STATEMENT AS TO USE OF MARK	Proposed to be used
ANY OTHER IMPORTANT INFORMATION OR STATEMENT	
VERIFICATION	<i>I hereby verify that above mentioned facts are true to best of my knowledge and belief.</i>
Date	27-05-2025 10:46 PM

**Attachment Detail**

No Attachment.