



Companies House
— for the record —

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Annual Return



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Received for filing in Electronic Format on the: **23/08/2010**

Company Name: **Robot No. 2 Limited**

Company Number: **00353187**

Date of this return: **28/07/2010**

SIC codes: **9999**

Company Type: **Private company limited by shares**

Situation of Registered Office: **WAKEFIELD ROAD
LEEDS
WEST YORKSHIRE
UNITED KINGDOM
LS10 1DU**

Officers of the company

Company Secretary 1

Type: **Person**
Full forename(s): **SARAH LOUISE**

Surname: **MORTON**

Former names:

Service Address: **WAKEFIELD ROAD
LEEDS
WEST YORKSHIRE
UNITED KINGDOM
LS10 1DU**

Company Director ***I***

Type: **Person**

Full forename(s): **MR JONATHAN ROWLATT HUBER**

Surname: **RIDDLE**

Former names:

Service Address: **WAKEFIELD ROAD
LEEDS
WEST YORKSHIRE
UNITED KINGDOM
LS10 1DU**

Country/State Usually Resident: **ENGLAND**

Date of Birth: **28/11/1960**

Nationality: **BRITISH**

Occupation: **TAX MANAGER**

Statement of Capital (Share Capital)

Class of shares	ORDINARY	<i>Number allotted</i>	1
		<i>Aggregate nominal value</i>	1
<i>Currency</i>	GBP	<i>Amount paid per share</i>	1
		<i>Amount unpaid per share</i>	0

Prescribed particulars

THE SHARES HAVE ATTACHED TO THEM FULL VOTING, DIVIDEND AND CAPITAL DISTRIBUTION (INCLUDING ON WINDING UP) RIGHTS; THEY DO NOT CONFER ANY RIGHTS OF REDEMPTION.

Statement of Capital (Totals)

<i>Currency</i>	GBP	<i>Total number of shares</i>	1
		<i>Total aggregate nominal value</i>	1

Full Details of Shareholders

The details below relate to individuals / corporate bodies that were shareholders as at 28/07/2010 or that had ceased to be shareholders since the made up date of the previous Annual Return

A full list of shareholders for a private or non-traded public company are shown below

Shareholding 1 : 1 ORDINARY shares held as at 2010-07-28
Name: ROBOT NO. 7 LIMITED

Authorisation

Authenticated

This form was authorised by one of the following:

Director, Secretary, Person Authorised, Charity Commission Receiver and Manager, CIC Manager, Judicial Factor.