

Annual Return

363a

Pleas	se co	mplete	e in	types	cript,
or in	bold	black	cap	oitals	

CHFP010

Company Number

1	4	1	1	0	8	0
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Company Name in full

MMV	RETAIL	LIMITED			
			<u> </u>	-	

Date	of	this	return
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The information in this return is made up to

Day	Month	Year			
2 0	0 5	2009			

Date of next return

If you wish to make your next return to a date earlier than the anniversary of this return please show the date here Companies House will then send a form at the appropriate time

Day	Month	Year
L	LL	LLLL

100 NEW BRIDGE STREET

Registered Office

Show here the address at the date of this return

Any change of registered office **must** be notified on form 287

Post town

LONDON

County / Region

ı

UK Postcode

EC4V 6JA

Principal business activities

Show trade classification code number(s) for the principal activity or activities

5248	

If the code number cannot be determined, give a brief description of principal activity

1	ADDPPAF3*	
RSDAY	ADDPPAF3	65

04/06/2009 COMPANIES HOUSE When you have completed and signed the form please send it to the Registrar of Companies at

Companies House, Crown Way, Cardiff, CF14 3UZ for companies registered in England and Wales or

DX 33050 Cardiff

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB

for companies registered in Scotland

Or LP-4 Edinburgh 2

Directors Please list directors	n alphabetical order	Details of new directors must be notified on form 288a
* Voluntary details	Name * Style / Title	1
In the case of a directo		Day Month Year
that is a corporation or a Scottish firm, the name is the corporate	Date of birth	3 1 0 3 1 9 6 9
or firm name	Forename(s)	TOSHITAKE
	Surname	GOTO
†† Tick the box if the address shown is a service address for the beneficiary of a	Address ††	1-26-14 HATSUDAI, SHIBUYA-KU
Confidentiality Order granted under section		
723B of the Companies Act 1985	Post town	ТОКУО
Otherwise, give your usual residential address in the case	County / Region	UK Postcode
of a corporation or Scottish firm, give th		JAPAN Nationality JAPANESE
registered or principal office address		CORPORATE EMPLOYEE
Directors Please list directors	ın alphabetical order	Details of new directors must be notified on form 288a
Directors Please list directors * Voluntary details		
Please list directors * Voluntary details In the case of a direct	Name * Style / Title	
Please list directors * Voluntary details In the case of a direct that is a corporation o a Scottish firm the name is the corporate	Name * Style / Title	
Please list directors * Voluntary details In the case of a direct that is a corporation o a Scottish firm the	Name * Style / Title or Date of birth	Day Month Year
Please list directors * Voluntary details In the case of a direct that is a corporation o a Scottish firm the name is the corporate or firm name	Name * Style / Title Date of birth Forename(s) Surname	Day Month Year 2 3 0 8 1 9 5 9 TATSUNOSUKE
Please list directors * Voluntary details In the case of a direct that is a corporation o a Scottish firm the name is the corporate or firm name The Tick the box if the address shown is a service address for	Name * Style / Title Date of birth Forename(s) Surname	Day Month Year 2 3 0 8 1 9 5 9 TATSUNOSUKE
Please list directors * Voluntary details In the case of a direct that is a corporation o a Scottish firm the name is the corporate or firm name The Tick the box if the address shown is a	Name * Style / Title Date of birth Forename(s) Surname Address 11	Day Month Year 2 3 0 8 1 9 5 9 TATSUNOSUKE
Please list directors * Voluntary details In the case of a direct that is a corporation of a Scottish firm the name is the corporate or firm name The Tick the box if the address shown is a service address for the beneficiary of a Confidentiality Orde granted under section 723B of the Companies Act 1985	Name * Style / Title Date of birth Forename(s) Surname Address †† Post town	Day Month Year 2 3 0 8 1 9 5 9 TATSUNOSUKE OTA 3-21-16 SHOAN SUGINAMI-KU
Please list directors * Voluntary details In the case of a direct that is a corporation of a Scottish firm the name is the corporate or firm name The Tick the box if the address shown is a service address for the beneficiary of a Confidentiality Orde granted under section 723B of the	Name * Style / Title Date of birth Forename(s) Surname Address †† Post town	Day Month Year 2 3 0 8 1 9 5 9 TATSUNOSUKE OTA 3-21-16 SHOAN SUGINAMI-KU TOKYO
Please list directors * Voluntary details In the case of a direct that is a corporation o a Scottish firm the name is the corporate or firm name †† Tick the box if the address shown is a service address for the beneficiary of a Confidentiality Orde granted under section 723B of the Companies Act 1988 Otherwise, give you usual residential	Name * Style / Title Date of birth Forename(s) Surname Address †† Post town County / Region Country	Day Month Year 2 3 0 8 1 9 5 9 TATSUNOSUKE OTA 3-21-16 SHOAN SUGINAMI-KU TOKYO UK Postcode

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Register of members If the register of members is not	kent at the	
registered office, state here whe kept	re it is	
	Post town	
Cour	nty / Region	UK Postcode
Register of Debenture ho	alders	
If there is a register of debenture	e holders,	
or a duplicate of any such registroof it, which is not kept at the regi	stered	1
office, state here where it is kept	t Post town	1
Cour	ity / Region	UK Postcode
Company type		
Public limited company		
Private company limited by share	es	x
Private company limited by guar without share capital	antee	
Private company limited by share	es	> Please tick the appropriate box
exempt under section 30 Private company limited by guar	antee	
exempt under section 30 Private unlimited company with 9	share	
capital Private unlimited company without	uit share	
capital	di dilaio	
Company Secretary * Voluntary details		Details of a new company secretary must be notified on form 288a
	Style / Title	
details of joint secretaries)	orename(s)	
†† Tick the box if the	Surname	ABOGADO NOMINEES LIMITED
address shown is a service address for the beneficiary of a	Address ++	100 NEW BRIDGE STREET
Confidentiality Order granted under section		
723B of the Companies Act 1985 Otherwise, give your	Post town	LONDON
usual residential	nty / Region	UK Postcode EC4V 6JA
of a corporation or Scottish firm, give the registered or principal office address	Country	
If a partnership give the names and addresses of the partners or the name of the partnership and office address		

Enter details of all the shares in issue at the date of this return	Class (e.g. Ordinary/Preference)	Number of shares issued	Aggregate Nominal Value (i.e. Number of shares issued multiplied by nominal value per share or total amount of stock)
Ordinary		404,000	£404,000 00
[_
		<u> </u>	
1		I	
	Totals	404,000	404,000 00
Traded public companies A traded public company means a company any of whose shares are shares admitted to trading on a regulated market	Please tick this box if you public company at any til return	ur company was a traded me during the period of this	
List of past and present shareholders	Please tick the appropria	ite box below	in another on paper format
(use attached schedule where appropriate)		for a private or non-traded	x m
Private or non-traded public companies are required to provide a full list if one was not included with either of the last two returns	public company is enclos Schedule A		
Traded public companies are required to provide a list of shareholders who held at least 5% of the issued shares of any share class if a list was not provided with either of the last two returns		lding at least 5% of the are class for a traded public ease complete Schedule	
	A list containing shareho	lder changes is enclosed	
	→ For private or non- please complete	traded public companies,	
	→ For traded public complete Schedu		
	There were no sharehold	der changes in this period	
Certificate	I certify that the inform knowledge and belief	ation given in this return	s true to the best of my
Signe	ed T. Goto	Da	te May 20.2009
† Please delete as appropriate	† (director / secretary)		
When you have signed the return send it with the fee to the Registrar of Companie Make cheques payable to Companies House		cludes 1 (enter number)	continuation sheets
You do not have to give any contact information in the box opposite but if you do, it will help Companies House to contact.	act BAKER & MCKENZI	E LLP (REF EWK),	LOO NEW BRIDGE
you if there is a query on the form. The contact information that you give will be	[STREET, LONDON,	EC4V 6JA	
visible to searchers of the public record	1 _	Tel [
BLUEPRINT	DX number 233	DX exchange C	HANCERY LANE
OneVoild			



Schedule A for private or non-traded public companies List of past and present shareholders

(Please use a continuation sheet if required)

CHFP010

Company Number [411080

Company Name in full HMV RETAIL LIMITED

This must only be completed by private and public limited companies that have not traded on a regulated market

- Changes to shareholders' particulars or details of the amount of stock or shares transferred must be completed each year
- You must provide a "full list" of all the company shareholders on
 - The company's first annual return following incorporation
 - Every third annual return after a full list has been provided
- List the company shareholders in alphabetical order to provide an index
- List joint shareholders consecutively

Do not	Do not give shareholder address information						
	Shares or amount of stock transferred (if appropriate)						
Shareholder's name only	Class and number of shares or amount of stock held	Class and number of shares or amount of stock transferred	Date of registration of transfer				
Name HMV JAPAN HOLDINGS CO , LTD	£1 00 Ordinary		18				
	Shares Held 404,000						
Name							
Name							