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~ORM No. 363

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Pursuant

Stions 363 and 364 of the Companies Act 1985

Please do not write in this margin

Note The appropriate fee should accompany this form

Please complete

To the Registrar of Companies

Company number

SOUTH ESSEX

For official use

Postcode

779100

legibly, preferably in black type, or bold block lettering

*Insert full name

tif the company has a share capital, this date must be the

14th day efter the

annual general meeting

Annual return of (note 1)

INSURANCE BROKERS GROUP LIMITED

The information in this return is as at

974 AUGUST 19 89

t. (The date of this return note 1)

Address of registered office of the company

SOUTH ESSEX HOUSE, NORTH

KOAD

SOUTH OCKENDON

RM 15 6N V

ESSEX

Total amount of indebtedness of the company in respect of mortgages and charges

(note 2)

NIL

If different from the registered office, state address where the register of members or any register of debenture holders or any duplicate or part of any register of debentures is kept or may be inspected.

Register of members

Register of debenture holders

Particulars of the secretary

Name (notes 3 and 4) JASLYN FEHLER

Previous name(s) (note 3)

Address (notes 4 and 5) ST. FRANCIS FARM CASTLEDON ROAD, DOWNHAM

BILLERICAY **,ESSEX** Postcode | CM II 141

‡Only pages 1 and 2 need be completed in the case of a company without share capital

SEnter number of continuation sheets attached

We certify this return which comprises pages 1, 2, [3, 4, 5 and 6]‡ [pluss NIL continuation sheets]

Signet

Director, and

JH Felder

Secretary

Presentor's name, address and reference (if any):

KINGSTON SHITH

CHARTERED ALLOUNT ANTS

DENCHETIBE HOUSE 146 BISHOPSGATE

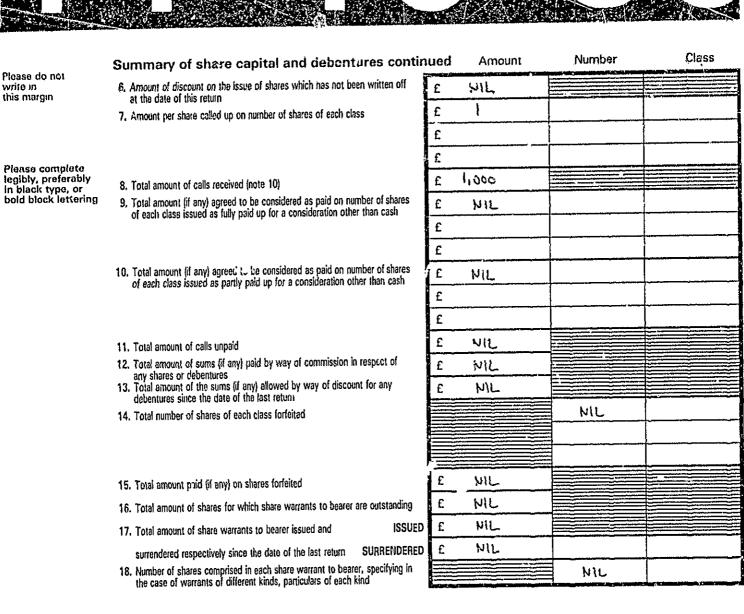
TONDON ECTH ALX

DEE & MAR

For official use General Section

Particulars of the directors of the c		Business Occupation	Please do nôt vvrite in
		INSURANCE BROKER	this margin
Previous name(s) (note 3)		Nationality	
Address (note 5) ST. FRANCIS FA	IRM , CASTLEDON ROAD	BRITISH	
B, MAHUWOC		Date of birth (note 9)	 Please comple legibly, prefera
ESSEX	Postcode CM II ILH		in black type, o bold black lette
Other relevant past or present dir	ectorships* (note 8)		• Delete if
SOUTH ESSEX INSURANCE	BROKERS LTD; SOUTH ESSE	L MANAGEHENT LTD	inappropriate Enter particul of other direct ships held or previously he If this space insufficient us continuation s
Name (note 3)		Business Occupation	7
Previous name(s) (note 3)		Nationality	-
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		Date of birth (note 9)	
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	divided Into:-	1 1,0	000	ORDIN	ARY	£ 1	<u> </u>	Please complete legibly, preferably
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				2	·			
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AND PRESENT MEMBERS (notes 11 and 12)

		Account of Shares		
Number of shares or amount of stock held by existing members at date of return (note 11)	Particulars of shares to return, or, in the case of the company, by (b) persons who have	till members, and fers (note 12)	Remarks	
(note 11)	Number	Date of Registra (a)	ation of transfer (b)	
600				
400				
	1	1	}	