

Resignation of director or secretary

288b

Please complete in typescript, or in bold black capitals.

	Comp	any Number	955321
Co	ompany	Name in full	BETACOM PLC.
× F 2 8 8	B 0 1	9 ×	
Resignation form	Date	e of resignation	Day Month Year
	Resignation as director		as secretary Please mark the appropriate box. If resignation is as a director and secretary mark both boxes.
	NAME	*SØe / Title	*Honours etc
Please insert details as previously notified to Companies Hous		Forename(s)	ALBERT THOMAS
	Surname		BULNS
			Day Month Year
		[†] Date of Birth	22 07 36
If cossition is other than			

† Directors only.

Please give the name, address, telephone number and, if available, a DX number and Exchange of the person Companies House should contact if there is any query.

resignation, please state reason



Form revised March 1995

A ser	ving director, secre	etary etc must	sign the form	ı below.
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MARK BROOKEL PO BOX 69, ENTIFELD
MIDDLESEX, ÉNZ 7TH
Tel 0181 - 344 - 6200
DX number 200 DX exchange
When you have completed and signed the form please send it to the

Registrar of Companies at:

DX 33050 Cardiff Companies House, Crown Way, Cardiff, CF4 3UZ for companies registered in England and Wales

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB DX 235 Edinburgh for companies registered in Scotland

^{*} Voluntary details.