

Please complete in typescript,

288a

APPOINTMENT of director or secretary

| or in bold black capitals (| | (NOT | for re | _ | - | | - | | | - | cha | ange |) | |
|--|--|---|--|--------|----------|--------|---------------------|----------------------|---------------------------|---------------|----------|------------------|----|--|
| CHFP029 | Company Number | 96428 | | or p | aru | cuia | rs (u: | se ro | rm 28 | 50 <i>C))</i> | | | | |
| C | Atlas | Atlas Advertising Limited | | | | | | | | | | | | |
| | | Dav | Month | | Year | | <u> </u> | | Day | Month | | Year | | |
| Appointmen | Date of appointment t | 1 9 | 0 9 | 2 | 0 0 | 3 | | ate of irth | 0 7 | 0 5 | 1 | 9 5 | 5 | |
| form | Appointment as director | X | | as | secr | etary | | | mark the a irector and | | | | | |
| Notes on completion appear on reverse. | NAME *Style / Title | | Horiours etc | | | | | | | | _ | | | |
| | Forename(s) Surname | ' L | SWEETLAND | | | | | | | | | | | |
| | Previous Forename(s | | | | | | | Previous name(s | | | | | | |
| | 27 HE | 27 HERONDALE AVENUE | | | | | | | | | | | | |
| | LOND | LONDON | | | | | Postcode SW | | | W18 3JL | | | | |
| | County / Region | n | | | | | | | Country | ENGLA | ND. | | | |
| | †Nationalit | yBRITI | SH | | | | †Busi | ness oc | cupation | DIREC | TOR | | | |
| | †Other directorship: (additional space overleaf | f) | sent to/a | act as | **/dir | rector | / secret | orv of th | ne abov | e name | ed Co | ompan | v | |
| | Consent signatur | e | Chi | 107 | Sm | elle | and | | Date | 2.3 | <u> </u> | 9/1 | 03 | |
| * Voluntary details. † Directors only. | | A director, secretary etc must sign the form below. | | | | | | | | | | | | |
| **Delete as appropriate | • Signe | d | Trunge Willang | | | | | | Date | ३७/१०/७७ | | | | |
| | | | ector / secr | | <u> </u> | | | | / receiver r | nanager / | receiv | rer) | | |
| Please give the name, address, telephone number and, if available, a DX number and Exchange of | | | ULOMA ADIGHIBE, 1-5 MIDFORD PLACE, LONDON, W1T 5BH | | | | | | | | | | | |
| the person Con contact if there | npanies House should is any query. | Tel 020 7 | | | | | | 020 726 | 2 4343 | | | | | |
| | | | DX number DX exchange | | | | | | | | | | | |

A35
COMPANIES HOUSE

30/09/03

Form revised July 1998

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, CF14 3UZ

for companies registered in England and Wales or

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

DX 235 Edinburgh

| | Company Number | 964286 |
|---|---|--------|
| † Directors only. | † Other directorships | |
| | | |
| | | |
| NOTES | | |
| Show the full forenames, NOT INITIALS. If the director or secretary is a corporation or Scottish firm, show the name on surname line and registered or principal office on the usual residential line. | | |
| Give previous forenames or sumame(s) except: - for a married woman, the name by which she was known before marriage need not be given. | | |
| - for names not used since the age of 18 or for at least 20 years | | |
| A peer or individual known by a title may state the title instead of or in addition to the forenames and surname and need not give the name by which that person was known before he or she adopted the title or succeeded to it. | | |
| Other directorships. | | |
| Give the name of every company incorporated in Great Britain of which the person concerned is a director or has been a director at any time in the past five years. | | |
| | mpany which either is, or at all ive years when the person tor, was | |
| - domant | | |
| a parent company when making the return, or | nich wholly owned the company | |
| another wholly owned subsidiary of the same parent company. | | |
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