

Please complete in typescript, or in bold black capitals.

CHFP010

**Company Number** 

**APPOINTMENT of director or secretary** 

(NOT for res	ignation (u	se Form 2	88b) or
change of p	articulars (	use Form	288c))

01468436

		-							
Company Name in full Medical Ultrasonics Limited									
		Day Month	Year		_	Day	Month		Year
Appointment form	Date of appointment	2 8 0 2	2 0 0 7		ate of 2		0 1	1	9 6 6
Notes on completion appear on next page.		х	as secretary		ease mark a director				appointment is the boxes.
	NAME * Style / Title	Mr		* Hond	ours etc				
	Forename(s)	Ulf Stefan							
	Surname	Fristedt							
	Previous forename(s)			1	revious   ame(s)				
	Usual residential address	Rainenweg !	58						
	Post town	4153 Reinac	ch		Postc	ode			
	County / Region				Cou	ıntry	Switz	erla	nd
	† Nationality	Swedish			siness [ pation		ef Fin icer	anci	al
(ac	† Other directorships ditional space next page)	See attache	ed schedule					_	
		I consent to act	as ** director / s	secreta	ry of the	abov	e name	d con	npany
	Consent signature	Stet	motel		_ D	ate	23	03	2007
* Voluntary details.		A director, sec	retary etc mus	t sign 1	— the form	ı belo			

- \* Voluntary details.
- † Directors only.
- \*\* Please delete as appropriate

Signed

or

Date

28/02/2007

(\*\*a directer./ secretary / administrator./ administrative receiver / receiver manager / receiver)

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.

The Company Secretary, 310-312 Dallow Road, Luton, Beds., LU1 1TD, England Tel DX number DX exchange

A31 28/03/2007 309 **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 DX 33050 Cardiff for companies registered in England and Wales

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

*	Company Number	0146843	6		
† Directors only.	† Other directorships				
				<del>-</del>	 

## **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 surname(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.

You may exclude a company which either is, or at all times during the past five years when the person concerned was a director, was

- dormant
- a parent company which wholly owned the company making the return, or
- another wholly owned subsidiary of the same parent company.





Please complete in typescript,

CH

## List of other directorships Schedule to form 288a

nck capitals.		
Company Number	01468436	
Company Name in full	Medical Ultrasonics Limited	
Name	Ulf Stefan Fristedt	
		·
	Company Number Company Name in full	Company Number 01468436  Company Name in full Medical Ultrasonics Limited

Company Name	Resignation
Pegasus (UK) Limited	