CHFP080

**FORM No. 600** 

Notice of appointment of liquidator Voluntary winding up (Members or Creditors)

**600** 

Please do not Write in this margin

Please complete legibly preferably in black type or bold block

lettering

\*insert full name Of company

Pursuant to section 109 of the Insolvency Act 1986

To the Registrar of Companies		For official	l use	Compa	Company number	
				015	587520	
Name of Company			•		·	
* Torex Retail 100 Limited – In Memb	ers Voluntary L	iquidation				
Nature of Business						
Dormant				-		
IAWe give notice that I/We have been 11 September 2008 The appointment was by members Type of liquidation Members' Volunta		dator <del>(s)</del> of the	above	company on		
Name of Liquidator Simon James Office holder number 2603 Address Benedict Mad 62 Wilson Sti		C2A 2BU				
Signature S(Q)		[	Date 12	Sept 1- 2	DOY_	
Name of Liquidator Office holder number Address						
Signature			Date			
Presentor's name and address and reference (If any)	For Official Us General Secti		WEDNESDAY			
Time Critical Reference		_	W	AEXKB3 A21 17/09/20 COMPANIES	08 400	