

013/13

363a

Please complete in typescrip	t,
or in bold black capitals.	

CHFP010

Company Number

Company Name in full

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А	n	п	L	Ia		К	E	LL	и	

1613848

ABSALOM & TRIBE LIMITED

Date of this return (See note 1)

The information in this return is made up to

Date of next return (See note 2)
If you wish to make your next return to a date earlier then the anniversary of this return please show the date here.
Companies House will then send a form at the appropriate time.

Registered Office (See note 3)
Show here the address at the date of this return.

Any changes of registered office **must** be notified on form 287.

Post town

County / Region

Postcode

Da	ау	Month			Υe	ar	
1	5	0	2	1	9	9	9

Day	Month	Year_
1		1

11 Church Street

			•	 	
		<u> </u>			
IZINGCOD TOCI	7				

SOUTH DEVON

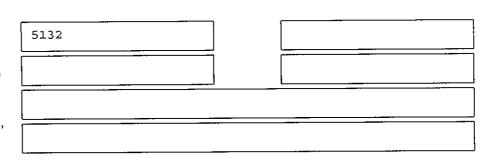
TQ7 1BT

Principal business activities

(See note 4)

Show trade classification code number(s) for the principal activity or activities.

If the code number cannot be determined, give a brief description of principal activity.





When you have completed and signed the form please send it to the Registrar of Companies at:

Companies House, Crown Way, Cardiff, CF4 3UZ

for companies registered in England and Wales

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

DX 33050 Cardiff

Register of members		PARROTT & PARROTT, CERTIFIED ACCOUNTANTS, 11 CHURCH				
If the register of members is not kept at the registered office, state here where it is		STREET				
kept.	Post town	KINGSBRIDGE				
(County / Region	DEVON Postcode TQ7 1BT				
Register of Debenture (See note 6)	e holders					
If there is a register of debenture holders and it is	not					
kept at the registered office state where it is kept.	3					
•	County / Region	Postcode				
Company type (See	note 7)					
Public limited company						
Private company limited by	shares	X				
Private company limited by	guarantee					
without share capital Private company limited by	shares	Please mark the appropriate box				
exempt under section 30 Private company limited by	guarantee	T lease mark the appropriate box				
exempt under section 30 Private unlimited company	_					
capital						
Private unlimited company capital	without share					
Company Secretary	(See notes 1-5)	Details of a new company secretary must be notified on form 288a.				
Name	* Style / Title	* Honours etc				
(Please photocopy this area to provide details of joint	Forename(s)	ROBERT JAMES				
secretaries).	Surname	TRIBE				
* Voluntary details. Previ	ous forename(s)					
Previous surname(s)						
Address		46 Forest Ridge, Keston Park				
Usual residential address must be given. In the	s					
case of a corporation, give the registered or	Post town	KESTON				
principal office address.	County / Region	KENT Postcode BR2 6EQ				
	Country	KENT				

Company Secretarial and Compliance Software

Directors (See notes 1-5) Please list directors in alphabetical order.	Details of new directors must be no	tified on forr	n 288a		
Name * Style / Title		Day	Month Year		
* Honours etc	Da	ate of 0 1 Birth	0 7 1 9 4 1		
Forename(s)	ROBERT JAMES				
Surname	TRIBE	****			
Previous forename(s)					
Previous surname(s)					
Address	46 Forest Ridge, Keston Par	k			
Usual residential address must be given. In the					
case of a corporation, post town give the registered or	KESTON				
principal office address. County / Region	KENT	Postcode	BR2 6EQ		
Country	KENT	Nationality	BRITISH		
Business occupation	COMPANY DIRECTOR				
Other directorships					
* Voluntary details.					
Name * Style / Title	Mr	Day	Month Year		
* Honours etc	D	ate of 2 9	0 1 1 9 4 9		
Forename(s)	JOHN DAVID				
Surname	ABSALOM				
Previous forename(s)					
Previous surname(s)			/		
Address	BOWMANS BASTED LANE				
Usual residential address must be given. In the					
case of a corporation, Post town give the registered or	CROUCH SEVENOAKS				
principal office address. County / Region	KENT	Postcode	TN15 8PZ		
Country	ENGLAND	Nationality	BRITISH		
Business occupation	COMPANY DIRECTOR				
Other directorships					
Company Secretarial and Compliance Software			Page		

Directors (See notes 1-5) Please list directors in alphabetical order.	Details of new directors must be notified on form 288a
Name * Style / Title	Day Month Year
* Honours etc	Date of 2 5 0 3 1 9 5 4 Birth
Forename(s)	ALFRED
Surname	SAMUELS
Previous forename(s	
Previous surname(s	
Address	111 DEVONSHIRE WAY., SHIRLEY
Usual residential address must be given. In the	
case of a corporation, Post town give the registered or	CROYDON
principal office address. County / Region	SURREY Postcode CR0 8BY
Country	ENGLAND Nationality BRITISH
Business occupation	MEAT TRADER
Other directorship	
* Voluntary details.	
Name * Style / Titl	Day Month Year
* Honours et	Date of
Forename(s)
Surnam	
Previous forename(s)
Previous surname(s)
Address	
Usual residential address	
must be given. In the case of a corporation, Post tow	n
give the registered or principal office address. County / Region	n Postcode
Count	y Nationality
Business occupation	n
Other directorship	s

Issued share capital (See note 9) Enter details of all the shares in issue at the date of this return.	Class (e.g. Ordinary/Preference)	Number of issued shares	Aggregate Nominal Value (i.e. Number of shares issued multiplied by nominal value per share)
ORDINARY		10,000	10,000.00
	Totals	10,000	10,000.00
List of past and present member (use attached schedule where appropriate) A full list is required if one was not included with either of the last two	Prs There were no change	s in the period X on pape] er in another format
returns. (See note 10)	A list of changes is end	<u></u>	
Elective Resolutions (Private companies only) (See note 11)	with a If at the date of this r	eturn an election is in force annual general meetings, a eturn an election is in force unts in general meetings, a	e to dispense
Certificate	I certify that the informing knowledge and be	mation given in this retu elief.	rn is true to the best of
Signet † Please delete as appropriate.	† a director / secretary	Date	pp.4.99
When you have signed the return send it with the fee to the Registrar of Companie Cheques should be made payable to Companies House.		eludes (enter number)	continuation sheets.
Please give the name, address, telephon number and, if available, a DX number at Exchange of the person Companies House	nd	T, CERTIFIED ACCOUN	
should contact if there is any query.	DX number	Tel DX exchange	



List of past and present members

Please complete in typescript, or in bold black capitals.	Schedule to form 363a, 363b
CHFP010 Company Number	1613848
Company Name in full	ABSALOM & TRIBE LIMITED
Class (e.g. Ordinary / Preference)	ORDINARY Number of shares or amount of stock held by existing members at date of this return. Particulars of shares or stock transferred since the date of the last return (or in the case of the first return, since the incorporation of the company) by (a) persons who are still members, and (b) persons who have ceased to be members.
Name and address	Number or Number or Date of amount amount registration of currently held Transferred transfer Remarks
ROBERT JAMES TRIBE 46 Forest Ridge, Keston Park, KESTON, KENT, BR2 6EQ, KENT	5,000
JOHN DAVID ABSALOM BOWMANS BASTED LANE, CROUCH SEVENOAKS, KENT, TN15 8PZ, ENGLAND	5,000