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## 363a

CHFP036

Please complete in typescript, or in bold black capitals

**Annual Return** 

1683631

**Company Number** 

Company Name in full

METALOID	LIMITED	 <del></del> -	 <del>-</del>	 

Date of this return (See note 1) The information in this return is made up to

Day		<u>M</u> onth		Year				
2	2	0	2	2	0	0	0	

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

Day	Month	Year		
	] ]			
<u> </u>				

1 CONDUIT STREET

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

Post town

County / Region

Postcode W1R 9TG

LONDON

Principal business activities

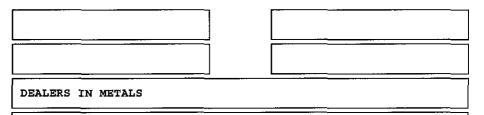
(See note 4)

Any change of

on form 287.

registered office must be notified

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



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



A25 COMPANIES HOUSE

25/03/00

Form revised July 1998

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

Companies House, Crown Way, Cardiff, CF4 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

Register of member If the register of membe registered office, state h	rs is not kept at the					
	Post town					
	County / Region				Postcode	
Register of Debentu (See note 6)	re holders					
If there is a register of de and it is not kept at the r state where it is kept.						
state where it is kept.	Post town	!				
	County / Region				Postcode	
Company type (See	∍ note 7)		-			
Public limited company						
Private company limited by	shares					
Private company limited by share capital	guarantee without					
Private company limited by under section 30	shares exempt	Please mark the appropriate box				
Private company limited by under section 30	guarantee exempt					
Private unlimited company	with share capital					
Private unlimited company	without share capital	_				
Company Secretary	(see notes 1-5)	Details of a new o	company	secretary mu	ıst be notifie	d on form 288a.
(Please photocopy this area to provide Name details of joint	* Style / Title		•	*H	onours etc	
secretaries).	Forename(s)					
	Surname	PORTLAND REGIS	ORTLAND REGISTRARS LIMITED			
* Voluntary details Prev	vious forename(s)					
Pre	vious surname(s)		1.2.1			
Addres	ss	1 CONDUIT STR	EET			
Usual residential	1					
address must be given. In the case of a	Post town					
corporation, give the registered or principal office address.	County / Region	LONDON			Postcode	WIR 9TG
onice addiess.	Country					

Page 2

Details of new directors must be notific	ed on form 28	38a.		
MR	Da	y Month Year		
Date o	f birth 2	2 0 6 1 9 5 5		
CHARIS				
CHARALAMBOUS				
65 EVAGORA PALLIFARIDE STREET				
LATSIA				
NICOSIA	Postcode			
CYPRUS	Nationality	CYPRIOT		
ACCOUNTANT				
MRS	Da	y Month Year		
Date o		0 0 3 1 9 6 6		
ARLENE				
NAHIKIAN				
12 EVRIPIDOU STREET, FLAT 301				
ENGOMI 2413				
NICOSIA	Postcode			
CYPRUS	Nationality	CYPRIOT		
ADMINISTRATOR				
	MR  CHARIS  CHARALAMBOUS  65 EVAGORA PALLIFARIDE STREET  LATSIA  NICOSIA  CYPRUS  ACCOUNTANT  MRS  Date of ARLENE  NAHIKIAN  12 EVRIPIDOU STREET, FLAT 301  ENGOMI 2413  NICOSIA  CYPRUS	CHARIS  CHARALAMBOUS  65 EVAGORA PALLIFARIDE STREET  LATSIA  NICOSIA  Postcode  CYPRUS  ACCOUNTANT   MRS  Date of birth  2  ARLENE  NAHIKIAN  12 EVRIPIDOU STREET, FLAT 301  ENGOMI 2413  NICOSIA  Postcode  CYPRUS  Nationality		

Directors (co	nunuea)		Details of flew directors in	idat be noun	ea on 101111 20	oa.	
·	Name	* Style / Title	MR		Day	y Month	Year
		*Honours etc		Date o		2 1 2	1 9 5 9
		Forename(s)	SERGEY				
		Surname	SOUKHOLINSKI				
	Previo	ous forename(s)					·
	Previ	ous surname(s)					· · · · ·
	Address		APPT 10 RUE DE COMME	RCE 3			
	_				**		
Usual residentia address must be In the case of a	e given.	Post town	GENEVA				
corporation, give registered or print office address.		County / Region			Postcode	CH1204	
onice address.		Country	SWITZERLAND		Nationality	ISRAELI	
	Busines	s occupation	LAWYER				
	Other di	rectorships			·		
* Voluntary details							
	Name	* Style / Title			_ Day	y Month	Year
		*Honours etc		Date of	f birth		
		Forename(s)					
		Surname					
	Previo	ous forename(s)					
	Previo	ous surname(s)	-	· · · · · · · · · · · · · · · · · · ·			
	Address	ĺ			·		
Usual residentia	1			,			
address must be In the case of a		Post town					
corporation, give registered or prir		County / Region			Postcode		
office address.	•	Country			Nationality		
	Business	occupation			L.		
		ectorships					
		[					



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## CHFP036

Please complete in typescript, or in bold black capitals.

**Company Number** 

## List of past and present members Schedule to form 363a, 363b

1683631	

METALOID LIMITED

## Company Name in full

Number of shares or amount of stock held by existing members at date of this

Particulars of shares or stock transferred since the date of the last return (or in case of the first return, since the incorporation of the company) by

(a) persons who are still members, and

return. (b) persons who have ceased to be members. Number or Date of Number or registration amount amount Name and address Remarks of transfer currently held transferred ANGLO MANX HOLDINGS LTD (CONTINUED) ORDINARY ORDINARY 07/02/2000 TRANSFERRED TO DENEB INVESTMENTS LIMITED 94 DOWDESWELL STREET, NASSAU ORDINARY ORDINARY 07/02/2000 ANGLO MANX INVESTMENTS LTD (CONTINUED) TRANSFERRED TO DENEB 94 DOWDESWELL STREET, NASSAU INVESTMENTS LIMITED DENEB INVESTMENTS LIMITED ORDINARY 10 MNASIADOU STREET, ELMA HOUSE, CY 100 0165 NICOSIA

Issued share capital (see note 9)	Class (e.g. Ordinary/Preference)	Number of shares issued	Aggregate Nominal Value		
Enter details of all the shares in issue at the date of this return.			(i.e. Number of shares issued multiplied by nominal value per share)		
	ORDINARY	100	£100.00		
	Totals	100	£100.00		
List of past and present members (Use attached schedule where appropriate) A full list is required if one was not included with either of the last two	There were no changes i	n the period			
returns. (see note 10)		on paper	in another format		
	A list of changes is enclo	sed			
	A full list of members is e	enclosed			
Elective resolutions (Private companies only) (see note 11)	If at the date of this return	n an election is in force t annual general meetings			
	If at the date of this return laying accou	n an election is in force t unts in general meetings			
Certificate	I certify that the information knowledge and belief.	on given in this return is	true to the best of my		
Signed	X Klille	Date	22/03/2000		
†Please delete as appropriate	† a director / secretary				
When you have signed the return send it with the fee to the Registrar of Companies Cheques should be made payable to Companies House.	This return includes	s cont	inuation sheets.		
Please give the name, address,	PORTLAND REGISTRAR	S LIMITED			
telephone number and if available a DX number and Exchange of the person Companies House should	1 CONDUIT STREET, LONDON				
contact if there is any query.	WIR 9TG	Tel			
	DX number	DX exchange			