

S.E.B
001588
#12

363a

Please complete in typescript,
or in bold black capitals.

Annual Return

Company Number

1757338

Company Name in full

FRITIDSRESOR LIMITED



* F 3 6 3 A C 4 0 *

Date of this return (See note 1)

The information in this return is made up to

Day Month Year

16 10 97

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

Registered Office (See note 3)

Show here the address at the date of this return.

44/45 CHANCERY LANE,

Any change of
registered office
must be notified
on form 287.

Post town

LONDON WC2A

County / Region

Postcode

1 1JB

Principal business activities

(See note 4)

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

9 3 0 5

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



A08 *AAC401KL* 67
COMPANIES HOUSE 29/11/97

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

or

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB

for companies registered in Scotland

DX 235 Edinburgh

Page 1

Register of members (See note 5)

If the register of members is not kept at the registered office, state here where it is kept.

Post town

County / Region

44/45 CHANCERY LANE,

LONDON WC2A

Postcode

1 1JB

Register of Debenture holders

(See note 6)

If there is a register of debenture holders and it is not kept at the registered office, state here where it is kept.

Post town

County / Region

44/45 CHANCERY LANE,

LONDON WC2A

Postcode

1 1JB

Company type (See note 7)

Public limited company

Private company limited by shares

Private company limited by guarantee without share capital

Private company limited by shares exempt under section 30

Private company limited by guarantee exempt under section 30

Private unlimited company with share capital

Private unlimited company without share capital

☐☒☐☐☐☐☐

Please mark the appropriate box

Company Secretary (See note 8)

(Please photocopy this area to provide details of joint secretaries).

Name * Style / Title

Forename(s)

Surname

* Voluntary details.

Previous forename(s)

Previous surname(s)

Address

Details of a new company secretary must be notified on form 288a

*Honours etc

44/45 CHANCERY LANE,

LONDON

County / Region

Postcode

WC2A 1JB

ENGLAND

Usual residential address must be given. In the case of a corporation, give the registered or principal office address.

Directors (See note 8)
Please list directors in alphabetical order.

Details of new directors must be notified on form 288a

Name	* Style / Title			
			Day	Month
			12	09
			59	
		Date of birth		
	* Honours etc			
	Forename(s)	GUNILLA MAJKEN		
	Surname	RUDEBJER-BLOMQVIST		
	Previous forename(s)			
	Previous surname(s)			
	Address	JUPITERVAGEN 28		
	Post town	LIDINGO		
	County / Region		Postcode	S-181 63
	Country	SWEDEN	Nationality	SWEDISH
	Business occupation	FINANCIAL MANAGER		
	Other directorships	STAR TOUR OF SCANDINAVIA LIMITED		

* Voluntary details

Name	* Style / Title			
			Day	Month
			25	10
			57	
		Date of birth		
	* Honours etc			
	Forename(s)	CARINA INGER KERSTIN		
	Surname	SANNEMALM		
	Previous forename(s)			
	Previous surname(s)			
	Address	KASTANJEVAGEN 14		
	Post town	JARFALLA		
	County / Region		Postcode	S-175 64
	Country	SWEDEN	Nationality	SWEDISH
	Business occupation	ACCOUNTS MANAGER		
	Other directorships	STAR TOUR OF SCANDINAVIA LIMITED		

Usual residential address must be given. In the case of a corporation, give the registered or principal office address.

Directors (continued)

Details of new directors must be notified on form 288a

Name	* Style / Title				
			Day	Month	Year
* Honours etc		Date of birth	03	08	57
Forename(s)	PETER JARL				
Surname	WETTERSTRAND				
Previous forename(s)					
Previous surname(s)					
Address	NASVAGEN 26				
Post town	VARMDÖ				
County / Region		Postcode	S-139 00		
Country	SWEDEN	Nationality	SWEDISH		
Business occupation	PURCHASING MANAGER				
Other directorships	STAR TOUR OF SCANDINAVIA LIMITED				
* Voluntary details					

Usual residential address must be given. In the case of a corporation, give the registered or principal office address.

Name	* Style / Title				
			Day	Month	Year
* Honours etc		Date of birth			
Forename(s)					
Surname					
Previous forename(s)					
Previous surname(s)					
Address					
Post town					
County / Region		Postcode			
Country		Nationality			
Business occupation					
Other directorships					

Usual residential address must be given. In the case of a corporation, give the registered or principal office address.

Please complete in typescript,
or in bold black capitals

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

Company Number

1757338

Company Name in full

FRITIDSRESOR LIMITED

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 amount currently held	Number or amount Transferred	Date of registration of transfer	Remarks
BENGT HILDING BENGTTSSON BOX 16400 STOCKHOLM, SWEDEN S-103 27	ORD 0	ORD 1	01/03/1997	To: FRITIDSRESOR AB
FRITIDSRESOR AB S-117 85 STOCKHOLM SWEDEN	ORD 1000			

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 shares issued	Aggregate Nominal Value (i.e. Number of shares issued multiplied by nominal value per share)
ORDINARY	1000	£1000
Totals	1000	£1000

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 returns.

(See note 10)

There were no changes in the period

☐

on paper

in another format

A list of changes is enclosed

☐
☐

A full list of members is enclosed

☒
☐

Elective resolutions

(Private companies only)

(See note 11)

If at the date of this return an election is in force to dispense with annual general meetings, mark this box

☐

If at the date of this return an election is in force to dispense with laying accounts in general meetings, mark this box

☐

Certificate

I certify that the information given in this return is true to the best of my knowledge and belief.

Signed

Mary AB

Date

14/11/97

† 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

(enter number)

continuation sheets

Please give the name, address, telephone number, and if available, a DX number and Exchange, for the person Companies House should contact if there is any query.

VINGE AB	
Attn. K Miller, 44/45 Chancery Lane	
London, UK, , WC2A 1JB	Tel 0171 404 4825
DX number	DX exchange