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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 98

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

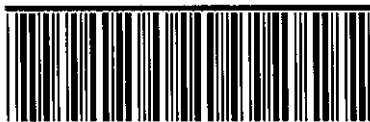
Principal business activities

(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.



A12 *AJ3U6BT0* 61

COMPANIES HOUSE 03/12/98

COMPANIES HOUSE 21/11/98

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

<input type="checkbox"/>
<input checked="" type="checkbox"/>
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<input type="checkbox"/>
<input type="checkbox"/>

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	Year	
* Honours etc		Date of birth	24	03	62
Forename(s)	KARIN EVA-LENA				
Surname	PERSSON ALMEBY				
Previous forename(s)					
Previous surname(s)					
Address	STORA MOSSENS BACKE 5				
Usual residential address must be given. In the case of a corporation, give the registered or principal office address.	Post town	BROMMA			
	County / Region	Postcode	SE-167 56		
	Country	Nationality	SWEDISH		
	Country	SWEDEN			
Business occupation	HEAD OF SYSTEMS DEVELOPMENT				
Other directorships	STAR TOUR OF SCANDINAVIA LIMITED				
* Voluntary details					

Name	* Style / Title				
		Day	Month	Year	
* Honours etc		Date of birth	03	04	62
Forename(s)	TOR				
Surname	CLAUSSEN				
Previous forename(s)					
Previous surname(s)					
Address	ESSINGE BROGATA 15				
Usual residential address must be given. In the case of a corporation, give the registered or principal office address.	Post town	STOCKHOLM			
	County / Region	Postcode	SE-112 61		
	Country	Nationality	NORWEGIAN		
	Country	SWEDEN			
Business occupation	MANAGER				
Other directorships	STAR TOUR OF SCANDINAVIA LIMITED				

Directors (continued)

Details of new directors must be notified on form 288a

Name	* Style / Title				
			Day	Month	Year
* Honours etc		Date of birth	24	12	56
Forename(s)	LARS ARNE				
Surname	NILSSON				
Previous forename(s)					
Previous surname(s)					
Address					
	SLANLVAGEN 19A				
Post town	JARFALLA				
County / Region		Postcode	SE-177 40		
Country	SWEDEN	Nationality	SWEDISH		
Business occupation	MANAGER				
Other directorships	STAR TOUR OF SCANDINAVIA LIMITED				
* Voluntary details					

Name	* Style / Title				
			Day	Month	Year
* Honours etc		Date of birth	12	12	58
Forename(s)	JAN ERIK FOLKE				
Surname	SEGELBERG				
Previous forename(s)					
Previous surname(s)					
Address	FURUVAGEN 10				
Post town	SUNDYBERG				
County / Region		Postcode	SE-172 33		
Country	SWEDEN	Nationality	SWEDISH		
Business occupation	PURCHASE MANAGER				
Other directorships	STAR TOUR OF SCANDINAVIA LIMITED				

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
FRITIDSRESOR AB SODER MALARSTRAND 27 STOCKHOLM, SWEDEN S-117 85	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

[Signature]
for and behalf of
VINGE AB

Date

20/11/98

† 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