

Please complete in typescript, or in bold black capitals.

APPOINTMENT of director or secretary

(NOT for resignation (use Form 288b) or change

| CHFP000 | | | of particulars (use Form 288c)) | | | | | | | | | | |
|---|---------|--|---|-------|------|---|-----------------|--------|------------|-----------|---|-------------|--------|
| | Company | Number | 177 | 587 | 8 | | | | ! | | | | |
| Company Name in full | | | THE ACTORS FILE LIMITED | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | Day M | 1onth | Year | | 4 | | Day | Month | } | Year | |
| | aţ | Date of oppointment | 2 1 0 | 9 1 | 9 9 | 9 | †Date Birth | | | | | | |
| Appointment Appointment as direction | | | as secretary Please mark the appropriate be as a director and secretary mark | | | | | | | | | | ent is |
| Notes on completion | NAME * | Style / Title | MIS | S | | | *Honou | rs etc | <u> </u> | | | | |
| appear on reverse. | Fo | orename(s) | ZARINA | | | | | | | | | | |
| | | Surname | RAFIQ | | | | | | | | | | |
| | Fo | Previous (rename(s) | - | · | | | Previ Surnam | 1 | | | | | |
| | Usual | residential address | TOP FLAT, 72 HIGHBURY PARK | | | | | | | | | | |
| Post town County / Region †Nationality †Other directorships (additional space overleaf) Consent signature * Voluntary details. † Directors only. **Delete as appropriate Signed | | | LONDON | | | | | Postco | ode NS 2XE | | | | |
| | | | - Cou | | | | | Cour | ntry | Y ENGLAND | | | |
| | | | †Business occupation | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | I consent to act as ** director / secretary of the above named company | | | | | | | | | | |
| | | | Date 5.10.99 | | | | | | | | | | |
| | | | A director, secretary etc must sign the form below. | | | | | | | | | | |
| | | | Date | | | | | | te | 5.10.99 | | | |
| | | (**a director / secretary / administrator / administrative receiver / receiver manager / receiver) | | | | | | | | | | | |
| Please give the name, address, telephone number and, if available, a DX number and Exchange of the person Companies House should contact if there is any query. | | | ZARINA RAFIQ | | | | | | | | | | |
| | | | 61-71 COLLIER ST. | | | | | | | | | | |
| | | | LONDON NI 9BE Tel 0171. 278.0087 | | | | | | | | | | |
| | | | DX number DX exchange | | | | | | | | | | |
| | | | When you have completed and signed the form please send it to the Registrar of Companies at: Companies House, Crown Way, Cardiff, CF14 3UZ DX 33050 Cardiff for companies registered in England and Wales | | | | | | | | | | |

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

for companies registered in England and Wales

for companies registered in Scotland

DX 235 Edinburgh

Form revised July 1998

COMPANIES HOUSE 07/10/99

| | Company Number | 1775878 | |
|-----------------|----------------------------------|---------|--|
| Directors only. | [†] Other directorships | | |
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NOTES

Show the full forenames, NOT INITIALS. If the director or secretary is a corporation or Scottish firm, show the name on surname line and registered or principal office on the usual residential line.

Give previous forenames or surname(s) except:

- for a married woman, the name by which she was known before marriage need not be given.
- for names not used since the age of 18 or for at least 20 years

A peer or individual known by a title may state the title instead of or in addition to the forenames and surname and need not give the name by which that person was known before he or she adopted the title or succeeded to it.

Other directorships.

Give the name of every company incorporated in Great Britain of which the person concerned is a director or has been a director at any time in the past five years.

You may exclude a company which either is, or at all times during the past five years when the person concerned was a director, was

- dormant
- a parent company which wholly owned the company making the return, or
- another wholly owned subsidiary of the same parent company.