

G

CHFP080

FORM No. 600

Notice of appointment of liquidator Voluntary winding up (Members or Creditors)

600

Please do not
Write in this marginPlease complete
legibly
preferably
in black type or
bold block
lettering
*Insert full name
of company

Pursuant to section 109 of the Insolvency Act 1986

To the Registrar of Companies
(Address Overleaf)

For official use

Company number

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02626328

Name of Company

* Trojan Treatments Limited

Nature of Business

Building maintenance

I give notice that I have been appointed liquidator(s) of the above company on 20 June 2012

Type of Liquidation Creditors

Name of Liquidator	Paul Walker
Office holder number	002649
Address	Suite 16 Rural Enterprise Centre Vincent Carey Road Rotherwas Industrial Estate Hereford HR2 6EE

Signature

Date 1 AUGUST 2012

Name of Liquidator
Office holder number
Address

Signature

Date

Presenter's name and address and
reference (If any)TROJA
Paul Walker
Harrisons Business Recovery and
Insolvency Limited
4 St Giles Court
Southampton Street
Reading
RG1 2QL

Time Critical Reference

For Official Use
General Section

Post room

THURSDAY



A14

02/08/2012

COMPANIES HOUSE

#198