

# G

CHWP000

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in this  
margin

Please complete  
legibly, preferably in  
black type, or bold  
block lettering  
\* insert full name of  
company

+ delete as  
appropriate

Presenter's name,  
address and  
reference (if any)

**FORM NO. 600**  
**Notice of appointment of liquidator**  
**Voluntary winding up**  
**Members**

# 600

Pursuant to section 109 of the Insolvency Act 1986

To Registrar of Companies

For official use

Company number

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02672698
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Name of company

MIS Brokers Limited

Nature of Business

Dormant company

I give notice that I have been appointed liquidator of the above company

on 7 July 2010

The appointment was by the company

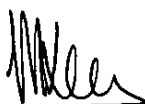
Type of liquidation members' voluntary

Name of Liquidator Samantha Keen

Office holder number 9250

Address Grant Thornton UK LLP, No. 1 Dorset Street, Southampton,  
Hampshire, SO15 2DP

Signature



Date 9 July 2010

Name of Liquidator

Office holder number

Address

Signature

Date

Grant Thornton UK LLP  
No 1 Dorset Street  
Southampton  
Hampshire SO15 2DP

For official use (02/00)

General section

Post room

Time critical reference

WEDNESDAY



\*A3NZ5LOD\*

A08

14/07/2010

301

COMPANIES HOUSE