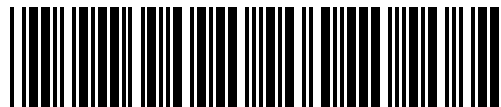




## Appointment of Director

Company Name: **THE HOSPITAL OF ST JOHN AND ST ELIZABETH**

Company Number: **02808390**



Received for filing in Electronic Format on the: **20/09/2021**

XADFSV3E

### New Appointment Details

Date of Appointment: **06/09/2021**

Name: **MR NABIL ARISS**

The company confirms that the person named has consented to act as a director.

Service address recorded as Company's registered office

Country/State Usually Resident: **ENGLAND**

Date of Birth: **\*\*/11/1961**

Nationality: **FRENCH**

Occupation: **INDEPENDENT DIRECTOR CORPORATE FINANCE**

## **Authorisation**

### **Authenticated**

**This form was authorised by one of the following:**

**Director, Secretary, Person Authorised, Administrator, Administrative Receiver, Receiver, Receiver manager, Charity Commission Receiver and Manager, CIC Manager, Judicial Factor**