

Please complete in typescript, or in bold black capitals.

CHFP029

Annual Return

Company Number	2915765
Company Name in full	Libra Health Group Limited

D-454l-i4		
Date of this return The information in this retu	rn is made un to	Day Month Year
	in to made up to	0 5 / 0 4 / 2 0 0 0
Date of next return		
If you wish to make your to a date earlier than the	anniversary	
of this return please show Companies House will th	w the date here.	Day Month Year
at the appropriate time.		0 5 / 0 4 / 2 0 0 1
Registered Office		
Show here the address this return.	at the date of	KINGS COURT
•		41-51 KINGSTON ROAD
Any change of registered office must be notified	Post town	LEATHERHEAD
on form 287.	County / Region	SURREY
	UK Postcode	K T 2 2 7 S Z

Principal business activities

Show trade classification code number(s) for the principal activity or activities.

for the principal activity or activities.	8511	L
	L	
If the code number cannot be determined, give a brief description of principal activity.	1	



28/05/00

Form revised September 1999

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 Scotland DX 235 Edinburgh

Register of m If the register of me registered office, st	embers embers is not kept at the eate here where it is kept.	<u></u>	
	Post town		
	County / Region		UK Postcode
If there is a register or a duplicate of an	ebenture holders r of debenture holders, ry such register or part ept at the registered here it is kept.	<u></u>	
	Post town		
	County / Region	1	UK Postcode
Company typ	e		
Public limited compar	ny		
Private company limit	ted by shares	x	
	ed by guarantee without		
•	ed by shares exempt under	Please tick	the appropriate box
Private company limit under section 30	ed by guarantee exempt		
Private unlimited com	pany with share capital		
Private unlimited com	pany without share capital		
Company Sec	cretary		
(Please photocopy this area to provide		Details of a new company secr	etary must be notified on form 288a.
details of joint sec- retaries).	Name * Style / Title		
* Voluntary details.	Forename(s)	JON	
If a partnership give the names and addresses of the part	Surname(s)	HATHER	
ners or the name of the partnership and office address.	Address	83 HIGH STREET	
Usual residential			
address must be given. In the case of corporation, or a	a Post town	FARNBOROUGH VILLAGE	
Scottish firm, give the registered or principal office address.	County / Region	KENT	UK Postcode B R 6 7 B B
	Country	ENGLAND	

Page 2

Direc	tor
Please	list d

Details of new directors must be notified on form 288a

, 10000 1101 011 0110101	m apnac	caour craci.				
	Name	* Style / Title	L ^{MR}			
Directors In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.	at	Date of birth Forename(s)	Day Month Year 1 1 / 0 9 / 1 9 4 8 ANTHONY GEORGE		-	
rate of intrinante.		, ,			<u></u>	
		Surname	HEYWOOD			
	Addres	ss	WOODHILL, CROSS IN HAND	····	- · · · · · · · · · · · · · · · · · · ·	
Usual residential address must be given. In the case of corporation or a Scottish firm, give th registered or principal office address.	e	Post town County / Region	NR HEATHFIELD EAST SUSSEX	UK Postcode	T N 2 1	0 T P
		Country	ENGLAND	Nationality	BRITISH	
	Busine	ess occupation	DIRECTOR			
* Voluntary details.						
	Name	* Style / Title	MR	-	-	
Directors In the case of a director that is a corporation or a Scottish firm, the name is the corpo-	at	Date of birth	Day Month Year			
rate or firm name.		Forename(s)	STEPHEN ROBERT			
		Surname	PAGE			
	Addres	SS	ACORN COTTAGE, PENN STREET			
Usual residential address must be given. In the case of corporation or a		Post town	AMERSHAM			
Scottish firm, give th registered or principa office address.		County / Region	BUCKS	UK Postcode	H P 7	OPLX
		Country	ENGLAND	Nationality	BRITISH	
	Busin	nee occumation	IOINT MANAGING DIR - PRIORY HE	EALTHCARE		

Issued share capital Enter details of all the shares in issue at the date of this return.	Class (e.g. Ordinary/Preference)	Aggregate Nominal Value (i.e. Number of shares issued multiplied by nominal value per share, or total amount of stock)		
	ORD 1P	7,300,000	£ 73,000.00	
			L	
	Totals	7,300,000	£ 73,000.00	
List of past and present shareholders (Use attached schedule where appropriate) A full list is required if one was not included with either of the last two	There were no changes	in the period X		
returns.	A list of changes is encl	on paper	in another format	
	A full list of shareholders	s is enclosed		
Certificate	I certify that the information knowledge and belief.	tion given in this return is	s true to the best of my	
Signed		Date	10.2.500	
† Please delete as appropriate.	a director / secret ary			
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 include	s (enter number)	ontinuation sheets.	
Please give the name, address, telephone number, and if available, a DX number and Exchange, for the person Companies should contest if there is any guest.	JON HATHER, WESTMINSTER HI	EALTH CARE, KINGS COURT, 41-5	I KINGSTON ROAD, LEATHERHEAD,	
contact if there is any query.	SURREY, KT22 7SZ		····	
		Tel _01372-860300		
	DX number 1	DX exchange :		

Directors

Details of new directors must be notified on form 288a

Please i	list (direct	ors ir	ı alp.	habet	ical	ord	er.
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	Name	* Style / Title	DR			
Directors In the case of a director the is a corporation or a Scottish firm, the			Day Month Year		_	
	at	Date of birth	14/09/1954			
name is the corporate or firm name.		Forename(s)	CHAITANYA BHUPENDRA			
		Surname	PATEL			
	Addres	s	THE THATCHED HOUSE, MANOR W.	AY	•	· · · · · · · · · · · · · · · · · · ·
Usual residential			<u> </u>	•		, <u>-</u>
address must be given. In the case of corporation or a		Post town	охѕнотт			
Scottish firm, give the registered or principa office address.		County / Region	SURREY	UK Postcode	JK JT J2 J2	JOJHJU
		Country	ENGLAND	Nationality	BRITISH	
	Busine	ss occupation	DIRECTOR			
* Voluntary details.	Name	* Style / Title	, MS			
Directors In the	Manie	- 1,	Day Month Year		<u>.</u>	
Directors In the case of a director that is a corporation or a Scottish firm, the	at	Date of birth	1 7 / 0 5 / 1 9 6 1			
name is the corporate or firm name.		Forename(s)	SERENA			
		Surname	STEWART			
	Addres	s	23 LINDSEY STREET			
Usual residential						
address must be given. In the case of corporation or a		Post town	EPPING			·
Scottish firm, give the registered or principal office address.		County / Region	ESSEX	UK Postcode	C M 1 6	6 R B
		Country	ENGLAND	Nationality	BRITISH	
	Busine	ss occupation	JOINT MANAGING DIR PRIORY HE	EALTHCARE		••••

Details of new directors must be notified on form 288a

DirectorsPlease list directors in alphabetical order.

	Name	* Style / Title	LMR		_	
Directors in the case of a director that is a corporation or a Scottish firm, the			Day Month Year			
	11	Date of birth	0 8 / 0 7 / 1 9 4 0			
name is the corporate or firm name.		Forename(s)	DAVID			
		Surname	TORBETT			
	Addres	ss	17 MAULTWAY CRESCENT			
Usual residential						
address must be given. In the case of corporation or a		Post town	CAMBERLEY			
Scottish firm, give the registered or principa office address.	•	County / Region	SURREY	UK Postcode	G U 1 5	1 P W
		Country	ENGLAND	Nationality	BRITISH	
	Busine	ess occupation	DIRECTOR OF OPERATIONS			
					,	
* Voluntary details.						
					·	
	Name	* Style / Title			_	
Directors In the case of a director that	at .		Day Month Year			
is a corporation or a Scottish firm, the		Date of birth				
name is the corporate or firm name.		Forename(s)				
		Surname				
	Addre	SS				
Usual residential						
address must be given. In the case of corporation or a	а	Post town	I			
Scottish firm, give the registered or principal office address.		County / Region	<u> </u>	UK Postcode		
omoc address.		Country	<u> </u>	Nationality		
	Busin	ess occupation		•	L	