



Confirmation Statement

Company Name: **KILN CLINIC LIMITED**

Company Number: **03005293**



Received for filing in Electronic Format on the: **13/01/2017**

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Company Name: **KILN CLINIC LIMITED**

Company Number: **03005293**

Confirmation **03/01/2017**

Statement date:

Statement of Capital (Share Capital)

Class of Shares:	ORDINARY	Number allotted	2
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Currency:	GBP	Aggregate nominal value:	2
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Prescribed particulars

FULL VOTING RIGHTS FULL RIGHTS TO DIVIDENDS AND CAPITAL ON WINDING UP

Statement of Capital (Totals)

Currency:	GBP	Total number of shares:	2
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Total aggregate nominal value:	2
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Total aggregate amount unpaid:	0
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Persons with Significant Control (PSC)

PSC notifications

Notification Details

Date that person became **03/01/2017**
registrable:

Name: **MR ROBERT MACINTYRE**

Service Address: **6 CHESHAM AVENUE
PETTS WOOD
ORPINGTON
KENT
ENGLAND
BR5 1AA**

Country/State Usually
Resident: **ENGLAND**

Date of Birth: ****/09/1946**

Nationality: **BRITISH**

Nature of control

The person holds, directly or indirectly, 75% or more of the shares in the company.

The person has the right, directly or indirectly, to appoint or remove a majority of the board of directors of the company.

The person holds, directly or indirectly, 75% or more of the voting rights in the company.

Confirmation Statement

I confirm that all information required to be delivered by the company to the registrar in relation to the confirmation period concerned either has been delivered or is being delivered at the same time as the confirmation statement

Authorisation

Authenticated

This form was authorised by one of the following:

Director, Secretary, Person Authorised, Charity Commission Receiver and Manager, CIC Manager,
Judicial Factor