

160114

363a

Please complete in typescript, or in bold black capitals.

CHFP010

**Company Number** 

**Company Name in full** 

Ar	m	ual	Re	tu	rn
----	---	-----	----	----	----

3020816 FALCON ELECTRICAL WHOLESALERS LIMITED

Date of this return (See note 1) The information in this return is made up

Date of next return (See note 2) If you wish to make your next return to a date earlier then the anniversary of this return please show the date here. Companies House will then send a form at the appropriate time.

**Registered Office** (See note 3) Show here the address at the date of this return.

Any changes of registered office must be notified on form 287.

Post town

County / Region

Postcode

Day	Month	Year
1 3	0 2	2 0 0 0

Day	Month	Year

82 ST JOHN STREET	<u>-</u>	
LONDON		
EC1M 4JN		

## Principal business activities

(See note 4)

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

If the code number cannot be determined, give a brief description of principal activity.

5272		



COMPANIES HOUSE

When you have completed and signed the form please send it to the Registrar of Companies at:

Companies House, Crown Way, Cardiff, CF4 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 membe						
If the register of member not kept at the registered	l				<del></del>	
office, state here where i kept.	Post town					
	County / Region			Postcode		
Register of Debento (See note 6)	ure holders					
If there is a register of debenture holders and it	is not					
kept at the registered offi state where it is kept.				<u></u>		
state where it is kept.	County / Region			Postcode		
Company type (Se	ee note 7)					
Public limited company						
Private company limited l	by shares	X				
Private company limited l without share capital	by guarantee					
without share capital Private company limited l	by shares		lease mark the	annronriato	hov	
exempt under section 30	h		lease mark me	appropriate	DOX	
Private company limited I exempt under section 30	by guarantee					
Private unlimited compar capital	y with share					
Private unlimited compar capital	y without share					
сарка						
Company Secretary	(See notes 1-5)	Details of a new comp	oany secretary	must be no	tified on form	288a.
Name	* Style / Title		* Hond	ours etc		
(Please photocopy this area to provide details of joint	Forename(s)	GURDEV KAUR				
secretaries).	Surname	внамвка				
Voluntary details. Pre	vious forename(s)					
Pre	evious surname(s)					
Addre	SS	19 BROOME PLACE,	BELLE ISLE			
Usual residential addres	ss					
case of a corporation, give the registered or	Post town	LEEDS		<u> </u>		
principal office address.	County / Region			Postcode	LS10 3JP	
	Country					
Company Secretarial and Compliance Software						Page

	-5)	Details of new directors must be	notified on for	rm 288a	
Please list directors in alphab	petical order.	Details of new directors must be	i notinea on io	1111 200a	
Name	* Style / Title		Day	Month	Year
	* Honours etc		Date of 2 Birth	5 0 7 1	9 5 1
	Forename(s)	BALJIT SINGH			
	Surname	BHAMBRA			
Pre	vious forename(s)				
Pre	evious surname(s)				
Addre	SS	FALCON HOUSE, SHEEPSCAR	STREET SOUTH	[	
Usual residential addres	ss				
must be given. In the case of a corporation, give the registered or	Post town	LEEDS			
principal office address.	County / Region		Postcode	LS7	
	Country		Nationality	BRITISH	
Busi	iness occupation	ELECTRICAL WHOLESALER			
Ott	her directorships	See attached schedule			
* Voluntary details.					
	* Style / Title				
Name			Day Date of	Month	Year
	* Honours etc		Birth 2	3 0 9 1	9 3
	Forename(s)	GURDEV KAUR			
	Surname	BHAMBRA			
Pre		BHAMBRA			
	Surname	внамвка			
	Surname vious forename(s) evious surname(s)	19 BROOME PLACE, BELLE I.	SLE		
Pre Addre Usual residential addres	Surname vious forename(s) evious surname(s) ss		SLE		
Addres  Usual residential addres must be given. In the case of a corporation,	Surname vious forename(s) evious surname(s) ss		SLE		
Pre  Addres  Usual residential addres  must be given. In the	Surname vious forename(s) evious surname(s) ss	19 BROOME PLACE, BELLE I.	SLE Postcode	LS10 3JP	
Addres  Usual residential addres must be given. In the case of a corporation, give the registered or	Surname vious forename(s) evious surname(s) ss Post town	19 BROOME PLACE, BELLE I.		LS10 3JP BRITISH	
Addres  Usual residential addres must be given. In the case of a corporation, give the registered or orincipal office address.	Surname vious forename(s) evious surname(s) ss  Post town County / Region	19 BROOME PLACE, BELLE I.	Postcode		
Address  Usual residential address must be given. In the case of a corporation, give the registered or principal office address.  Busi	Surname vious forename(s) evious surname(s) ss  Post town County / Region Country	19 BROOME PLACE, BELLE I.  LEEDS	Postcode		
Address  Usual residential address must be given. In the case of a corporation, give the registered or principal office address.  Busi	Surname vious forename(s) evious surname(s) ss  Post town Country / Region Country iness occupation	19 BROOME PLACE, BELLE I.  LEEDS  DIRECTOR	Postcode		

<b>Directors</b> (See notes 1 Please list directors in alphal		Details of new directors must be notified on fo	orm 288a
Name	* Style / Title	Da	y Month Year
	* Honours etc	Date of Birth	0 9 5 1 9 5 6
	Forename(s),	DR JOHN TOWN	
	Surname	SHANDRA	
Pre	vious forename(s)		
Pre	evious surname(s)		
Addre	ss	FALCON HOUSE, SHEEF SCAR STREET SOUT	H-
Usual residential addressmust be given. In the	SS		
case of a corporation, give the registered or	Post town		
principal office address.	County / Region	Postcode	257
	Country	Nationality	BATTISII
Bus	iness occupation	ELECTRICAL WHOLLSAUER	
Ot	her directorships	Sec_attached schedule	
* Voluntary details.			
Name	* Style / Title	Day	/ Month Year
	* Honours etc	Date of Birth	1 1 1
	Forename(s)		
	Surname		
Pre	vious forename(s)		
Pre	evious surname(s)		
Addre	ss		
Usual residential address must be given. In the	ss		
case of a corporation, give the registered or	Post town		
principal office address.	County / Region	Postcode	
	Country	Nationality	
Busi	iness occupation		
Otl	ner directorships		
Company Secretarial and Compliance Software			Page 4

Issued share capital (See note 9) Enter details of all the shares in issue at the date of this return.	Class (e.g. Ordinary/Preference)	Number of issued shares	Aggregate Nominal Value (i.e. Number of shares issued multiplied by nominal value per share)
ORDINARY		1,000	1,000.00
	Totals	1,000	1,000.00
List of past and present member (use attached schedule where appropriate) A full list is required if one was not included with either of the last two	ers There were no changes	in the period $\overline{\mathbf{x}}$	er in another format
returns. (See note 10)	A list of changes is enc	losed	
	A full list of members is	enclosed	
Elective Resolutions (Private companies only) (See note 11)	with a	eturn an election is in force annual general meetings, eturn an election is in force ants in general meetings,	mark this boxce to dispense
Certificate	I certify that the inform my knowledge and be		urn is true to the best of
Signe	t a director / secretary	untra. Dat	e 23 /5/w
† Please delete as appropriate.	† a director / secretary		
When you have signed the return send it with the fee to the Registrar of Companie Cheques should be made payable to Companies House.		(enter number)	continuation sheets.
Please give the name, address, telephon	I DONGAN CODEC BIT	ITED, 82 ST JOHN S	TREET, LONDON,
number and, if available, a DX number a Exchange of the person Companies Hou should contact if there is any query.			
should contact if there is any query.		[el	

DX number

DX exchange



Please complete in typescript, or in bold black capitals.

CHFP010

**Company Number** 

## List of past and present members Schedule to form 363a, 363b

3020816

**Company Name in full** FALCON ELECTRICAL WHOLESALERS LIMITED

Class

(e.g. Ordinary / Preference)

ORDINARY

Number of shares or amount of stock held by existing members at date of this return.

Particulars of shares or stock transferred since the date of the last return (or in the case of the first return, since the incorporation of the company) by

(a) persons who are still members, and

(b) persons who have ceased to be members.

		(b) person	io mno navo oca	sed to be members.
Name and address	Number or amount currently held	Number or amount Transferred	Date of registration of transfer	Remarks
BALJIT SINGH BHAMBRA FALCON HOUSE, SHEEPSCAR STREET SOUTH, LEEDS, LS7	445			
GURDEV KAUR BHAMBRA 19 BROOME PLACE, BELLE ISLE, LEEDS, LS10 3JP	110			
RAJPAL SINGH BHAMBRA FALCON HOUSE, SHEEPSCAR STREET SOUTH, LEEDS, LS7	445			



Please complete in typescript, or in bold black capitals.

CHFP010

## List of other directorships Schedule to form 363a

Company Number	3020816
Company Name in full	FALCON ELECTRICAL WHOLESALERS LIMITED
Name	BALJIT SINGH BHAMBRA

Company Name	Re	signation
STOCKHAVEN LIMITED		
	}	