

Please complete in typescript, or bold block capitals

RESIGNATION of director or secretary

(NOT for appointment (use Form 288a) or change of particulars (use Form 288c))

Company	number
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3254462

Company name in full

HEALTH REVIEWS LIMITED	

Resig	na	tio	n
form			

Day Month Year Date of resignation

Resignation as director

X as secretary Please mark the appropriate box. If resignation is as a director and secretary mark both boxes.

NAME

*Style/Title

*Honours etc

Please insert details as previously notified to Companies House

Forename(s)

WATERLOW NOMINEES LIMITED

§ Date of Birth

Surname

Day	Month	r ear
•		
	1	
		

If cessation is other than resignation, please state reason

A serving director, secretary etc must sign the form below

Signed

Signed for

and on behalf of Waterlow Nominees Lt

Date

by a serving director/secretary/administrator/administrative-receiver/receiver-manager/receiver

Please give the name, address, telephone number and, if available, a DX number and Exchange of the person Companies House should contact if there is any query.

Waterlow Company Services Classic House, 174-180 Old Street 0171-250 3350 London ECIV 9BP Tel DX number 122031 DX exchange Finsbury 3



Form revised March 1995

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 DX 235 Edinburgh for companies registered in Scotland

CED001/119327/CS /

^{*} Voluntary details

[§] Directors only