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Please complete in typescript, or in bold black capitals.

CHFP010

Company Number

3302720

Annual Return

000250 510

DX 33050 Cardiff

Company Name in full

BONAR	PACK	CENTRE	LTD		 	 	
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Data	_f	thic	return
Date	OI	เทเร	return

The information in this return is made up to

 Day
 Month
 Year

 0
 1
 0
 8
 2
 0
 0
 6

Date of next return

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

Day Month Year

Registered Office

Show here the address at the date of this return.

Any change of registered office **must** be notified on form 287.

Post town

County / Region

UK Postcode

ondon

W1H 7JG

Principal business activities

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.

7499

50 Seymour Street

AAR COMPANIES HOUSE

652 02/08/2006 When you have completed and signed the form please send it to the Registrar of Companies at:

Companies House, Crown Way, Cardiff, CF14 3UZ for companies registered in England and Wales

Non Trading Company

Ωr

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB for companies registered in Scotland DX 235 Edinburgh

Register of members f the register of members is not kept at the registered office, state here where it is kept. Post town County / Region	UK Postcode
Register of Debenture holders If there is a register of debenture holders, or a duplicate of any such register or part of it, which is not kept at the registered office, state where it is kept. Post town	
County / Region	UK Postcode [
Public limited company Private company limited by shares Private company limited by guarantee without share capital Private company limited by shares exempt under section 30 Private company limited by guarantee exempt under section 30 Private under section 30 Private unlimited company with share capital Private unlimited company without share capital	X Please tick the appropriate box
Company Secretary (Please photocopy this area to provide details of joint secretaries). Name * Style / Title Forename(s)	Details of a new company secretary must be notified on form 288a. AMANDA
* Voluntary details. If a partnership give the names and addresses of the partners or the name of the partnership and office address. Surname Address	WHALLEY 12 Merchant Court, 61 Wapping Wall, Wapping
Usual residential address must be given. In the case of a corporation, give the registered or principal office address. Post town County / Region Country	



Style / Title Directors In the case of a circetor name. Name Style / Title Day Month Year Date of birth Date	Directors Please list directors in alphabetical order. Name * Style / Title		Details of new directors must be notified on form 288a			
Directors In the case of a director that is a corporate or a Scottish firm, the name is the corporate or firm name. **Name** **Directors** **Name** **Directors** **Name** **Name** **Style / Title** **Directors** **Name** **Style / Title** **Directors** **Date of birth **Ountry / Region **Country / Region **Directors** **Name** **Style / Title **Day / Month / Year **Date of birth **Day / Month / Year **Date of birth **Forename(s) **Date of birth **Forename(s) **Date of birth **Forename(s) **Date of birth **Forename(s) **Date of birth **Style / Title **Date of birth **Date of birth **Date of birth **Style / Title **Date of birth **Date						
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or principal office address. Country England Nationality British	of a corporation,	Post town	London			
Country England Nationality British	or principal office	County / Region				
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Enter details of all the shares in issue at the date of this return.	Class e.g. Ordinary/Preference)	Number of share issued	Aggregate Nominal Value (i.e. Number of shares issued multiplied by nominal value per share, or total amount of stock)		
ORDINARY			100 £100.00		
		<u></u>			
	-		1		
	Totals		100 100.00		
List of past and present shareho	lders				
(use attached schedule where appropriate)	There were no change	s in the period	X		
A full list is required if one was not included with either of the last two		Or	paper in another format		
returns.	A list of changes is en	Г			
	A list of changes is on				
	A full list of shareholders is enclosed				
Certificate			aturn is true to the best of my		
	knowledge and belief.				
Signed	I Change he	4	Date 1/8/06		
† Please delete as appropriate.	ta director / secretary	<i></i>			
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 in	cludes 0 (enter number	continuation sheets.		
Please give the name, address, telephone	c/o Low & Bonar	PLC, 50 Seymou	Street, London,		
number and, if available, a DX number and Exchange of the person Companies	W1H 7JG, Englan	d			
House should contact if there is any query		Tel I			
			- 1		
Physprint	DX number	DX exchang	e		

Blueprint Company Secretary