

## 288a

## **APPOINTMENT** of director or secretary

Please complete in typescript, or in bold black capitals.		(NOT for resignation (us change of particulars (u		•	
CHFP010	Company Number	3371815			
Company Name in full		Tubular Barriers Limited			
		Day Month Yea		Day	Month Year
Appointment form	Date of appointment	1 1 0 5 2 0	0 5 † Dat	te of 1 6 Birth 1	1 0 1 9 6 0
Notes on completion appear on next page.		X as secretary Please mark the appropriate box. If appointment is as a director and secretary mark both boxes.			
	NAME * Style / Title	* Honours etc			
	Forename(s)	Franco			
Surname Previous forename(s) Usual residential address Post town County / Region † Nationality † Other directorships (additional space next page)		Martinelli			
		Previous surname(s)			
		Honeyfield, Overstream			
		Loudwater		Postcode	WD3 4LD
		Hertfordshire		Country	United Kingdom
		I British I '		upation Chartered Accountant	
		See attached schedule			
		I consent to act as ** director / secretary of the above named company			
Consent signature		True		Date	12/05/05
* Voluntary details.		A director, secretary etc must sign the form below.			

† Directors only.

\*\* Please delete as appropriate

Signed

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.



Tel DX number DX exchange

(\*\*a director / secretary / administrator / administrative receiver / receiver manager / receiver)

**Date** 

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