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Please complete in typescript, or in bold black capitals.

Resignation of director or secretary

Company Number			3391036								
¥ F 2 8	Company BBC7	Name in full	Sa	ЭНА	m +	174	LI	mí	(3)		
Resignatio form	tion Date of resignation			Month	Year						
•	Resignation as director		X	as se	cretary			se mark the appropriate box. If resignation a director and secretary mark both boxes.			
	NAME	*Style / Title	*Honours etc								
Please insert details as previously notified to Companies H		Forename(s)									
	ouse.			COMPA	NY NO	OMINEE	S LIM	ITED			
†Date of Birth If cessation is other than resignation, please state reason			Day	Month	Year						
· Voluntary details	3 .	Signed	107 a	nd on beha	tor, secret		-V	ign the	e form belo	-)
Directors only.			(by a serving director / secretary / administrator / administrative receiver / receiver manager / receiver								
Please give the name, address, selephone number and, if available, a DX number and Exchange of the person Companies House should			YORK PLACE COMPANY SERVICES LIMITED								
			12 YORK PLACE LEEDS LS1 2DS								

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contact if there is any query.

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 or

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB

TEL: 0113 242 0222 FAX: 0113 242 5904

for companies registered in Scotland

DX 26436 LEEDS 2

DX 235 Edinburgh