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		BB 415 706912
Please complete in typescript, or in bold black capitals.		Annual Return
Соп	npany Number	03418103
Company Name in full		LAW 873 LIMITED
Date of this return The information in this return is made up to		Day Month Year IO [9]/[0]9] [9] [9]
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.		SO VICTORIA EMBANKHENT
Any change of registered office must be notified on form 287.	Post town County / Region UK Postcode	LONDON
Principal business a		
for the principal activity of	• •	L
If the code number cannot be determined, give a brief description of principal activity.		



A11
COMPANIES HOUSE

15/03/00

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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

DX 33050 Cardiff

363a

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

for companies registered in Scotland

DX 235 Edinburgh

Pægister of members If the register of members is not kept at the registered office, state here where it is kept. Post town County / Region	
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 here where it is kept. Post town	
County / Region	UK Postcode
Company type 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 unlimited company with share capital Private unlimited company without share capital	Please tick the appropriate box
Company Secretary (Please photocopy this area to provide Name * Style / Title	Details of a new company secretary must be notified on form 288a.
this area to provide details of joint secretaries). Name Style 7 Title Forename(s)	KATHLEEN ROSA
* Voluntary details. If a narthership give Surname	
If a partnership give the names and addresses of the partners or the name of the partnership and office address.	HARRISON 33 CARLINGFORD ROAD
Usual residential	
address must be Post town given. In the case of a	LONDON
corporation or a Scottish firm, give the registered or prin-	UK Postcode W W 3 L L R Y
	ENGLAND

•		
Directors Please list directors in alphabetical order.		Details of new directors must be notified on form 288a
N	lame * Style / Title	
Directors In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.		Day Month Year
	Date of birth	1212/1011/1191218
	Forename(s)	ALAN THOMAS
	Surname	GRIEVE
Address		STOKE LODGE
Usual residential address must be given. In the case of a corporation or a Scottish firm, give the registered or principal office address.		CLEE DOWNTON
	Post town	MOTOM
	County / Region	SHROPSHIRE UK Postcode SIY 8 3 E 9
	Country	ENGLAND Nationality BRITISH
	Business occupation	SOLICITOR
* Voluntary details.	ame * Style / Title	1
Directors In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.	,	Day Month Year
	Date of birth	30/05/1943
	Forename(s)	KATHLEEN ROSA
	Surname	HARRISON
Address		33 CARLINGFORD ROAD

Post town | LONDON

Country ENGLAND

Business occupation COMPANY DIRECTOR

County / Region 1

Usual

residential

address must be given. In the case of a

corporation or a Scottish firm, give the registered or principal

office address.

UK Postcode Nω3 L LRY

Nationality RRITISH

Issued share capitalEnter details of all the shares in issue at the date of this return.

Class

(e.g. Ordinary/Preference)

Number of shares issued

Aggregate Nominal Value

(i.e. Number of shares issued multiplied by nominal value per share, or total amount of stock)

	ORDINARY	100	£100
	1	1	I
	Totals	100	£ 100
List of past and present shareholders (Use attached schedule where appropriate) A full list is required if one was not	There were no change	s in the period	
included with either of the last two returns.		on paper	in another format
		Г	
	A list of changes is encl	osed	
	A full list of shareholders	s is enclosed	
	A full list of shareholders	s is choosed	
Certificate	I certify that the informat knowledge and belief.	tion given in this return is	true to the best of my
)	
Signed		Date	13
+ru	†a director / secretary		73.63.60
†Please delete as appropriate.	a director / decretary		
When you have signed the return send it with the fee to the Registrar of Companies. Cheques should be made payable to	This return include	cont	inuation sheets.
Companies House.			
Please give the name, address,			
telephone number and, if available, a DX number and Exchange, for	BARBARA KAL		
the person Companies House should	26 BROAD STR	EET, LUDLOW,	shropshire sybinj
contact if there is any query.		Tel 01584 8	75997
	DX number	DX exchange	