



Companies House
— for the record —

AR01 (ef)

Annual Return



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Company Name: **FOUR PHARMACEUTICALS LIMITED**

Company Number: **03430250**

Date of this return: **05/09/2012**

SIC codes: **21200**
72190

Company Type: **Private company limited by shares**

Situation of Registered Office: **23 UPPER GREEN ROAD**
TEWIN
WELWYN
HERTFORDSHIRE
AL6 0LE

Officers of the company

Company Secretary 1

Type: **Person**
Full forename(s): **JANE ELIZABETH**

Surname: **RAINE**

Former names:

Service Address: **23 UPPER GREEN ROAD
TEWIN
WELWYN
HERTFORDSHIRE
AL6 0LE**

Company Director **1**

Type: **Person**

Full forename(s): **JANE ELIZABETH**

Surname: **RAINE**

Former names:

Service Address: **23 UPPER GREEN ROAD
TEWIN
WELWYN
HERTFORDSHIRE
AL6 0LE**

Country/State Usually Resident: **UNITED KINGDOM**

Date of Birth: **13/10/1955** *Nationality:* **BRITISH**

Occupation: **PHARMACIST**

Company Director 2

Type: **Person**

Full forename(s): **PHILIP**

Surname: **RAINE**

Former names:

Service Address: **23 UPPER GREEN ROAD
TEWIN
WELWYN
HERTFORDSHIRE
AL6 0LE**

Country/State Usually Resident: **UNITED KINGDOM**

Date of Birth: **12/03/1956**

Nationality: **BRITISH**

Occupation: **PHARMACIST**

Statement of Capital (Share Capital)

Class of shares	ORDINARY	<i>Number allotted</i>	2
		<i>Aggregate nominal value</i>	2
<i>Currency</i>	GBP	<i>Amount paid per share</i>	0
		<i>Amount unpaid per share</i>	0
<i>Prescribed particulars</i>			
ONE VOTE PER SHARE			

Statement of Capital (Totals)

<i>Currency</i>	GBP	<i>Total number of shares</i>	2
		<i>Total aggregate nominal value</i>	2

Full Details of Shareholders

The details below relate to individuals / corporate bodies that were shareholders as at 05/09/2012 or that had ceased to be shareholders since the made up date of the previous Annual Return

A full list of shareholders for the company are shown below

Shareholding 1 : **1 ORDINARY shares held as at the date of this return**
Name: **PHILIP RAINE**

Shareholding 2 : **1 ORDINARY shares held as at the date of this return**
Name: **J.E RAINE**

Authorisation

Authenticated

This form was authorised by one of the following:

Director, Secretary, Person Authorised, Charity Commission Receiver and Manager, CIC Manager, Judicial Factor.