



BB
ZIS
301055

363a

Please complete in typescript,
or in bold black capitals.

Annual Return

Company Number

3438912

Company Name in full

PHARMPLEX LIMITED



* F 3 6 3 A C 4 0 *

Date of this return (See note 1)

The information in this return is made up to

Day Month Year

24 09 1998

Date of next return (See note 2)

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

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Registered Office (See note 3)

Show here the address at the date of this return.

70-72 ALMA ROAD

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

Post town

WINDSOR

County / Region

BERKSHIRE

Postcode

SL4 3EZ

Principal business activities

(See note 4)

Show trade classification code number(s) for the principal activity or activities.

5231

If the code number cannot be determined, give a brief description of principal activity.



A12 *AKZCXA2E* 606
COMPANIES HOUSE 01/10/98

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
for companies registered in Scotland DX 235 Edinburgh

Register of members (See note 5)

If the register of members is not kept at the registered office, state here where it is kept.

Post town
County / Region

Postcode

Register of Debenture holders

(See note 6)

If there is a register of debenture holders and it is not kept at the registered office, state here where it is kept.

Post town
County / Region

Postcode

Company type (See note 7)

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

X

Please mark the appropriate box

Company Secretary (See note 8)

(Please photocopy this area to provide details of joint secretaries).

Name * Style / Title

Forename(s)

Surname

* Voluntary details.

Previous forename(s)

Previous surname(s)

Address

Usual residential address must be given. In the case of a corporation, give the registered or principal office address.

Page No. 2 (Company No. 3438912) Country

Details of a new company secretary must be notified on form 288a

MISS

*Honours etc

NIKU

SURI

3 HALL GARDENS

BRAMCOTE

NOTTS

Postcode

NG9 3LR

Directors (See note 8)
Please list directors in alphabetical order.

Details of new directors must be notified on form 288a

Name	* Style / Title	MRS		Day	Month	Year
	* Honours etc			Date of birth	27	09 1958
Forename(s)		MAKINDER				
Surname		SURI				
Previous forename(s)						
Previous surname(s)						
Address		3 HALL GARDENS				
Post town		BRAMCOTE				
County / Region		NOTTINGHAM	Postcode	NG9 3LR		
Country			Nationality	KENYAN		
Business occupation		PHARMACIST				
Other directorships		PINEGROVE MANAGEMENT LIMITED				
* Voluntary details						

Name	* Style / Title			Day	Month	Year
	* Honours etc			Date of birth		
Forename(s)						
Surname						
Previous forename(s)						
Previous surname(s)						
Address						
Post town						
County / Region			Postcode			
Country			Nationality			
Business occupation						
Other directorships						

Usual residential address must be given. In the case of a corporation, give the registered or principal office address.

Issued share capital (See note 9)
Enter 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)
ORDINARY SHARES	1	£1
Totals	1	£1

List of past and present members

(Use attached schedule where appropriate)

A full list is required if one was not included with either of the last two returns.

(See note 10)

There were no changes in the period

☐

on paper

in another format

A list of changes is enclosed

☐
☐

A full list of members is enclosed

☒
☐

Elective resolutions

(Private companies only)

(See note 11)

If at the date of this return an election is in force to dispense with annual general meetings, mark this box

☐

If at the date of this return an election is in force to dispense with laying accounts in general meetings, mark this box

☐

Certificate

I certify that the information given in this return is true to the best of my knowledge and belief.

Signed



Date

17th September 1998

† a director / secretary

† Please delete as appropriate

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 includes

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continuation sheets

(enter number)

Please give the name, address, telephone number, and if available, a DX number and Exchange, for the person Companies House should contact if there is any query.

JAYCEE COMSERVICES LIMITED	
252 GOSWELL ROAD	
LONDON EC1V 7EB	Tel
DX number	DX exchange

Please complete in typescript,
or in bold black capitals

List of past and present members Schedule to form 363a, 363b

Company Number

3438912

Company Name in full

PHARMPLEX LIMITED

Number of shares or amount of stock held by existing members at date of this return.

Particulars of shares or stock transferred since the date of the last return (or in the case of the first return, since the incorporation of the company) by
(a) persons who are still members, and
(b) persons who have ceased to be members.

Name and address	Number or amount currently held	Number or amount Transferred	Date of registration of transfer	Remarks
APEX NOMINEES LIMITED 46A SYON LANE OSTERLEY MIDDLESEX TW7 5NQ	ORD. 0	ORD. 1	24/09/1997	Transferred to MRS MAKINDER SURI
MRS MAKINDER SURI 3 HALL GARDENS BRAMCOTE NOTTINGHAM NG9 3LR	ORD. 1			