

BB LIS

363a

Please complete in typescript, or in bold black capitals.

CHFP055

Annual Return

Company Number	3453732
Company Name in full	ONEBUILD LIMITED
Date of this return (See note 1)	Day Month Year
The information in this return is made up to	2 2 1 0 1 9 9 9
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 2 2 1 0 2 0 0 0
Registered Office (See note 3)	1 PARK PLACE
Show here the address at the date of this return.	CANARY WHARF
Any change of registered office Post town must be notified on form 287. County / Region	LONDON
Postcode	E14 4HJ
Principal business activities (See note 4)	
Show trade classification code number(s) for the principal activity or activities.	7415
If the code number cannot be determined, give a brief description of principal activity.	
le le	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 or

for companies registered in Scotland

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

Form revised July 1998

A10 COMPANIES HOUSE

23/02/00

DX 235 Edinburgh

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Register of members (See note 5)	1 PARK PLACE							
If the register of members is not kept at the registered office, state here where it is kept.	CANARY WHARF							
,								
Post town	LONDON							
County / Region	Postcode E14 4HJ							
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)								
Company type (See note 7) Public limited company								
Fublic littlifed company								
Private company limited by shares								
Private company limited by guarantee without share capital								
Private company limited by shares exempt under section 30	Please mark the appropriate box							
Private company limited by guarantee exempt under section 30								
Private unlimited company with share capital								
Private unlimited company without share capital								
Company Secretary (See notes 8)	Details of a new company secretary must be notified on form 288a.							
(Please photocopy this area to provide Name * Style / Title	* Honours etc							
details of joint secretaries). Forename(s)	CHRISTOPHER HENRY							
Surname	LOVELL							
* Voluntary details. Previous forename(s)								
Previous surname(s)								
Address	LES CHAMPS VERTS							
	LA ROUTE DE VINCHELEZ							
Usual residential	LEOVILLE							
address must be Post town	ST OUEN							
given. In the case of a corporation, give the County / Region	JERSEY Postcode JE3 2DB							
registered or principal office address.	Channel Islands							

Please list directors in a	•	tical order.	Details of new direct	ctors must be r	otifie	d o	ı fo	rm 2	:88a	ì.					
Na	me	* Style / Title				Da	av	Mor	oth		V	ear			
,				Date of	hirth	2	ау 3	1	2	1	9	4	, 5	٦	
		* Honours etc		Date of				<u> </u>	_	•				_	
		Forename(s)	BO GORAN										_		
		Surname	COLLDAHL												
	Previo	ous forename(s)													
	Previ	ious surname(s)													
Ad	dress		TYSTA GATAN 5												
Usual residential address must be			044500 0700000	01.14						<u></u>			_	_	
given. In the case of a		Post town	S11520 - STOCKHO											_	
corporation, give the registered or principal		County / Region	<u></u>		Po	stcc	de							_	
office address.		Country	SWEDEN	SWEDEN Nationalit						ity SWEDISH					
	Busir	ess occupation	DIRECTOR									•		_	
	Oth	er directorships	(See continuation sheet).												
* Voluntary details.															
Na	me	* Style / Title				D	ay	Мог	nth		Y	ear			
		* Honours etc		Date of	birth	1	6	1	0	1	9	5	3		
		Forename(s)	PETER GREGORY							-				_	
		Surname	JACKSON			<u> </u>								Ξ	
	Previ	ous forename(s)												=	
	Prev	ious surname(s)												_	
Ad	Idress		MONT ALTO									=			
			RUE DE FLICQUE	Γ										_	
Usual residential															
address must be given. In the case of a		Post town	ST MARTIN												
corporation, give the registered or principal		County / Region	JERSEY Postcode JE3 6BP									_			
office address.		Country	Channel Islands Nationality BRITISH								_				
	Busi	ness occupation	ENGLISH SOLICITO	R										=	
	Oth	er directorships	None										-	=	

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		2 £2.00					
	Totals		£2.00					
List of past and present member (Use attached schedule where appropriate)	ers							
A full list is required if one was not included with either of the last two return (see note 10)	There were no changes s.	in the period on pape	er in another format					
	A list of changes is enck	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, <i>mark this box</i> If at the date of this return an election is in force to dispense with							
		ounts in general meeting						
Certificate	I certify that the informat knowledge and kelief.	ion given in this return i	is true to the best of my					
Sig	ned #	luly Date	18/10/1999					
† Please delete as appropriate.	† a director /s corotar y							
When you have signed the return set with the fee to the Registrar of Comp Cheques should be made payable to Companies House.	anies.	udes 2 (enter number)	continuation sheets.					
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.	Lorraine Nixon/40630 Littlejohn Frazer DX 42660 Isle of Dogs Tel 0171 987 5030 ext							

Please list directors in a	-	ical order.	Details of new directo	rs must be i	notifie	d o	n fo	rm 288	a.			
, Nai	me	* Style / Title				D	ay	Month		Y	ear	
		* Honours etc		Date of	birth	1	 __ 1	0 6	1	9		_ 2
		Forename(s)	CHRISTOPHER HENRY									
		Surname	LOVELL								:	
	Previo	us forename(s)		<u></u>								
		ous surname(s)										
Add	dress		LES CHAMPS VERTS	· · · · · · · · · · · · · · · · · · ·				<u> </u>				
			LA ROUTE DE VINCH	IELEZ								
			LEOVILLE			_						
Usual residential address must be		Post town	ST OUEN									
given. In the case of a corporation, give the registered or principal		County / Region	JERSEY		Po	stcc	ode	JE3 2DB				
office address.		Country	Channel Islands		Natio	onal	BRITISH					
	Busin	ess occupation	ENGLISH SOLICITOR									
	Othe	er directorships	(See continuation sheet).									
* Voluntary details.												
Na	me	* Style / Title				D	ay	Month		Υ	ear	
		* Honours etc		Date of	birth							
		Forename(s)					- -					
		Surname		.,								_
	Previo	us forename(s)										
	Previ	ous surname(s)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								
Ad	dress											
						-						
Usual residential												
address must be given. In the case of a		Post town				•						
corporation, give the registered or principal		County / Region			Po	ostco	ode					
office address.		Country			Nati	ona	lity					
	Busin	ess occupation										
	Othe	er directorships										

Form 363a continuation sheet

, Çompany Number	3453732	
Company Name in full	ONEBUILD LIMITED	
Comment disease which for PA	O CORAN COLL DALI	
Current directorships for BC	OF NORWAY (UK) LIMITED	
WELLNESS CENTR).
		:
Past directorships for CHRI	STOPHER HENRY LOVELL	
	DF NORWAY (UK) LIMITED (19-Mar-1998)	
!		
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Please complete in typescript, or in bold black capitals.

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

CHFP055

Company Number 3453732

Company	Name	in full	ONEBUILD 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

	return.	(b) pers	ersons who have ceased to be members						
Name and address	Number or amount currently held	Number or amount Transferred	Date of registration of transfer	Remarks					
, and		Hansierieu	or transfer	remarks					
LOVELL JACKSON MATHEWS NOMINEES LIMITED									
BROADCASTING HOUSE, ROUGE BOUILLON, ST HELIER, JERSEY, JE2 3ZA.									
ORDINARY SHARES	1								
LOVELL JACKSON MATHEWS TRUSTEES LIMITED									
BROADCASTING HOUSE, ROUGE BOUILLON, ST HELIER, JERSEY, JE2 3ZA.									
ORDINARY SHARES	1								
	An an								

Directors (See note Please list directors in a		tical order.	Details of new di	rectors :	must be n	otifie	d or	ı fo	rm 288	3a.				
. Nai	me	* Style / Title					Da		Month		V	ear		
		*			Date of t	nirth	2	3	1 , 2				. 5	
		* Honours etc	BO GORAN								<u> </u>	<u> </u>		
		Forename(s)	COLLDAHL			<u></u>								
		Surname	COLLDANL											
	Previo	ous forename(s)												
	Previ	ous surname(s)												
Ad	11 THE WATER	GARDEI	NS TY	STA	G A	ĪAN	J 5							
			WARREN ROAD	-	\$1	152	0 -	STO	CK HO	LH				
Usual residential			KINGSTON HILL	•										
address must be given. In the case of a		Post town	KINGSTON UPO	N THAN	IES									
corporation, give the registered or principal		County / Region	SURREY			Po	stco	de	KT2 7	-7LF				
office address.		Country	United Kingdom	SWED	EN	Natio	onal	ity	SWED	ISH				
	Busin	ess occupation	DIRECTOR											
	Othe	er directorships	(See continuation sheet).											
* Voluntary details.														
Na	me	* Style / Title					Da	ay	Month	1	Ye	ear		
		* Honours etc			Date of I	birth	1	6	1 0	1	9	5	3	
		Forename(s)	PETER GREGO	RY										
		Surname	JACKSON											
	Previo	ous forename(s)				-								
	Previ	ious surname(s)			-									
Ad	ldress		MONT ALTO											
			RUE DE FLICQUET											
Usual residential														
address must be given. In the case of a		Post town	ST MARTIN											
corporation, give the registered or principal		County / Region	JERSEY			Po	ostco	de	JE3 6	3P				
office address.		Country	y Channel Islands Nationality BRITISH					SH						
	Busir	ness occupation	ENGLISH SOLICI	TOR										
	Oth	er directorships	None											