

288b

Please complete in typescript, or in bold black capitals.

Resignation of director or secretary

•											
Company Number			379	9464							
Company Name in full			SILVERCREST TRANSPORT LIMITED								
*F 2 8 8	B 0 1	9 ×									
Resignation form			Day	Month 1/7/	Year ∳9						
	Resignation as director		Х	X as secretary Please mark the appropriate bo							
	NAME	NAME *Style / Title		*				*Honours etc			
Please insert details as previously notified to Companies Hous		Forename(s)									
	90	Surname	PARAMOUNT PROPERTIES (U.K.) LIMITED Day Month Year								
	se.	ſ									
lf		†Date of Birth									
If cess resigna											
				ng direct		etary	etc must :	sign the	form below.		
* Voluntary details.		Signed	(AOTEGE)	OCO GIONATOR	···	X	-	Date	1/7/99		
† Directors only.		((by a servir	ng director X s	r XSKXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX				CHINEK IN EXCENSE MUNICIPALISM X (HE DEXI)		
Please give the telephone number a DX number the person Com	er and, if and Exc	available, hange of									
contact if there is any query.			Tel								
	DX number DX exchange When you have completed and signed the form please send it to the										
KLO * COMPANIE	at: wn W in En Castle	ay, Cardifi	r, CF4 3U Wales	Z DX 330 or h, EH1 2EB	o the 50 Cardiff Edinburgh						

Form revised March 1995