

## Please complete in typescript,

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CHANGE OF PARTIC	ULARS	for	dire	ctor	0
secretarv					

capitals.	(NOT for appointment (use Form 288a) or resignation (use Form 288b))		
Company Number	3824290		
mpany Name in full	CARLSTEDT CONSULTING LIMITED		
	Day Month Year		
Complete in all cases	Date of change of particulars 1 0 0 2 2 0 0 1		
Name * Style / Title	Mr * Honours etc		
Forename(s)	JOHAN		
Surname	CARLSTEDT		
	Day Month Year		
† Date of Birth	1 0 0 2 1 9 7 6		
Forename(s)			
Surname			
Il residential address	GARDEN FLAT, 6 REGENTS PARK ROAD		
Post town	LONDON		
County / Region	Postcode NW1 7TX		
Country			
(please specify)			
	A serving director, secretary etc must sign the form below.		
Signed	Delver Covell 1 Date 7/2/2001		
iate.	(*director/ secretary/ administrator/ administrative receiver/ receiver manager/ receiver)		
name, address, telephone vailable, a DX number and			
f there is any query.			
	Tel		
	DX number DX exchange		
	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 Card		
	Company Number Impany Name in full  Complete in all cases  Name * Style / Title Forename(s) Surname  † Date of Birth Forename(s) Surname I residential address Post town County / Region Country (please specify)  Signed  riate.  name, address, telephone evailable, a DX number and person Companies House person Companies House		

A12 COMPANIES HOUSE

24/02/01

for companies registered in England and Wales

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB for companies registered in Scotland

DX 235 Edinburgh