

Resignation of director or secretary

288b

Please	complete	in	typescript
or in bo	old black c	ap	oitals.

	Company Number	>456233
* F 2 B 8	Company Name in full B 0 1 9 *	Dream Scene Limited
Resignation form	Date of resignation Resignation as director	Day Month Year
	NAME *Style / Title	*Honours etc
Please insert details as previously notified to	Forename(s)	CRS LEGAL SERVICES LIMITED
	†Date of Birth sation is other than ation, please state reason	Day Month Year

Voluntary details.

† Directors only.

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



Form revised March 1995

A serving director, secretary etc must sign the form below.

Signed Date

(by a serving director / secretary / administrator / administrative receiver / receiver manager / receiver

Credit	Report	ing Services Li	mited
43a_Whi	tchurc	Road, Cardiff	, CF4 3JN.
		Tel 01222-521	177
DX number	50760	DX exchange	Cardiff 2

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

DX 235 Edinburgh for companies registered in Scotland