



Confirmation Statement

Company Name: **THE INTERNATIONAL MEDICAL EDUCATION TRUST**

Company Number: **03931085**



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X63PX700

Company Name: **THE INTERNATIONAL MEDICAL EDUCATION TRUST**

Company Number: **03931085**

Confirmation **22/02/2017**

Statement date:

Persons with Significant Control (PSC)

PSC notifications

Notification Details

Date that person became **22/02/2017**
registrable:

Name: **PROFESSOR COLIN JAMES GREEN**

Service Address: **ROWANDENE NOTTINGHAM ROAD
HERONSGATE
RICKMANSWORTH
HERTS
ENGLAND
WD3 5DL**

Country/State Usually
Resident: **ENGLAND**

Date of Birth: ****/03/1935**

Nationality: **BRITISH**

Nature of control

The person has the right to exercise, or actually exercises, significant influence or control over the company.

Confirmation Statement

I confirm that all information required to be delivered by the company to the registrar in relation to the confirmation period concerned either has been delivered or is being delivered at the same time as the confirmation statement

Authorisation

Authenticated

This form was authorised by one of the following:

Director, Secretary, Person Authorised, Charity Commission Receiver and Manager, CIC Manager,
Judicial Factor