

Please complete in typescript, or in bold black capitals.

Terminating appointment as director or secretary (NOT for appointment (use Form 288a) or change

CHEPUUU			or particulars (use i orini 2000))						
	Comp	any Number	403	5401					
C	ompany	Name in full	BLA		CK EXI	PRESS	INSURANCE	ANE	FINANCIAL SERVICES
			Day	Month	Y	ear	٦		
Date of te	Date of termination of appointment			/ 7	/ 20	φο			
		as director	x		as se	cretary	appoi		the appropriate box. If terminating as a director and secretary mark
	NAME	*Style / Title					*Honours	etc	
Please insert details as previously		Forename(s)							
notified to Companies House	se.	Surname	CON	MPANY	DIREC:	TORS LI	MITED		
·· ·			Day	Month	Y	ear			
		[†] Date of Birth							

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

Sı		
		C

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.



07/08/00

COMPANIES HOUSE

Form revised 1999

Date

2000

(** serving director / secretary / administrator / administrative receiver / receiver manager / receiver)

A1 Company Services L	imited <i>(Our</i>	Ref: TP/61686SF)	
788-790 Finchley Road	London	NW11 7TJ	
	Tel	0181 458 9637	
DX number	DX excha	ange	

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

for companies registered in Scotland

DX 235 Edinburgh

^{*} Voluntary details.

[†] Directors only.

^{*} Delete as appropriate