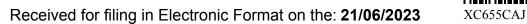




## **Confirmation Statement**

Company Name:ACADEMY OF PHARMACEUTICAL SCIENCESCompany Number:04245751



## Company Name: ACADEMY OF PHARMACEUTICAL SCIENCES

Company Number: 04245751

Confirmation **20/06/2023** 

Statement date:

## **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