CHFP080

Please do not

Write in this margin Please complete

legibly preferably in black type or bold block lettering *Insert full name

of company

FORM No. 600

Notice of appointment of liquidator Voluntary winding up (Members or Creditors)

600

Pursuant to section 109 o	of the Insoive	ncy Act 1986				
To the Registrar of Companies (Address Overleaf)		For official use		7 [Company number	
Name of Company						
* On Time Print and Desi	ign Limited					
Nature of Business						-
Printing						
I/We give notice that I/We 21st June 2005	€Thave been	appointed liqu	idator(s) of th	e above	company	on
The appointment was by	resolution pa	assed at a mee	eting of memb	ers and	ratified by	y creditors.
Type of liquidation Credi	itors					
Office holder number CAddress 2	Clive Robert I 3 04052 29 - 31 Grevil London EC1N 8RB	2112-6	2.			
Signature 🗠				Date	vy,	buss
Name of Liquidator Office holder number Address						
Signature				Date		
Presentor's name and address and reference (If any): ONTIM Clive Robert Hammond Pridie Brewster 29 - 31 Greville Street		For Official Use General Section			Post room	

London EC1N 8RB

Time Critical Reference



A57 COMPANIES HOUSE

29/06/05