

000234 / 15



363a

Please complete in typescript,
or in bold black capitals.

CHFP001

Annual Return

Company Number 4452818

Company Name in full COMMUNITY LAW CLINIC SOLICITORS LTD

Date of this return

The information in this return is made up to

Day Month Year

3 1 / 0 5 / 2 0 0 4

Date of next return

If you wish to make your next return
to a date earlier than the anniversary
of this return please show the date here.
Companies House will then send a form
at the appropriate time.

Day Month Year

/ /

Registered Office

Show here the address at the date of
this return.

20-22 HIGH STREET

Any change of
registered office
must be notified
on form 287.

Post town PINNER

County / Region MIDDLESEX

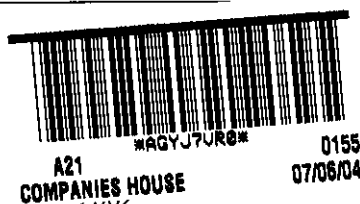
UK Postcode H A 5 5 P W

Principal business activities

Show trade classification code number(s)
for the principal activity or activities.

7411

If the code number cannot be determined,
give a brief description of principal activity.



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

or

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB
for companies registered in Scotland

DX 235 Edinburgh

Register of members

If the register of members is not kept at the registered office, state here where it is kept.

Post town _____
County / Region _____ UK Postcode

Register of Debenture holders

If there is a register of debenture holders, or a duplicate of any such register or part of it, which is not kept at the registered office, state here where it is kept.

Post town _____
County / Region _____ UK Postcode

Company type

Public limited company

Private company limited by shares

Private company limited by guarantee without share capital

Private company limited by shares exempt under section 30

Private company limited by guarantee exempt under section 30

Private unlimited company with share capital

Private unlimited company without share capital

<input type="checkbox"/>
<input checked="" type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

Please tick the appropriate box

Company Secretary

Details of a new company secretary must be notified on form 288a.

(Please photocopy this area to provide details of joint secretaries).

* Voluntary details.

†† Tick this box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985 otherwise, give your usual residential address. In the case of a corporation or Scottish firm, give the registered or principal office address.

Name	* Style / Title	MR
	Forename(s)	HARNEK
	Surname	SINGH
Address ††		97 EASTCOTE AVENUE
	Post town	SUDBURY
	County / Region	LONDON
	Country	

UK Postcode

If a partnership give the names and addresses of the partners or the name of the partnership and office address.

4452818

Directors

Please list directors in alphabetical order.

Details of new directors must be notified on form 288a

Directors In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.

†† Tick this box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985 otherwise, give your usual residential address. In the case of a corporation or Scottish firm, give the registered or principal office address.

Name	* Style / Title	MS	
	Day	Month	Year
Date of birth	2 5 / 1 2 / 1 9 6 6		
Forename(s)	AMRIK KAUR		
Surname	BAINS		
Address ††	25 DUNDONALD ROAD		
	KENSAL RISE		
Post town			
County / Region	LONDON	UK Postcode	N W 1 0 3 H P
Country		Nationality	BRITISH
Business occupation	SOLICITOR		

* Voluntary details.

Name	* Style / Title		
	Day	Month	Year
Date of birth			
Forename(s)			
Surname			
Address ††			
Post town			
County / Region		UK Postcode	
Country		Nationality	
Business occupation			

Issued share capital

Enter details of all the shares in issue at the date of this return.

Class
(e.g. Ordinary/Preference)

**Number of
shares issued**

**Aggregate
Nominal Value**

(i.e. Number of shares issued multiplied by nominal value per share, or total amount of stock)

ORDINARY

2

£2

Totals

2

£2

List of past and present shareholders

(Use attached schedule where appropriate)

A full list is required if one was not included with either of the last two returns.

There were no changes in the period

☐

on paper

in another format

A list of changes is enclosed

☐
☐

A full list of shareholders is enclosed

☒
☐
Certificate

I certify that the information given in this return is true to the best of my knowledge and belief.

Signed

Amr L. Jones

Date

31/05/2004

† Please delete as appropriate

† a director / secretary

When you have signed the return send it with the fee to the Registrar of Companies. Cheques should be made payable to Companies House.

This return includes 0 continuation sheets.

(enter number)

You do not have to give any contact information in the box opposite but if you do, it will help Companies House to contact you if there is a query on the form. The contact information that you give will be visible to searchers of the public record.

20-22 HIGH STREET

PINNER

MIDDLESEX HA5 5PW

Tel

DX number

DX exchange



List of past and present shareholders Schedule to form 363a

Company Number 4452818

Company Name in full COMMUNITY LAW CLINIC SOLICITORS LTD

- Changes to shareholders particulars or details of the amount of stock or shares transferred must be completed each year
- You must provide a "full list" of all the company shareholders on:
 - The company's first annual return following incorporation;
 - Every third annual return after a full list has been provided
- List the company shareholders in alphabetical order or provide an index
- List joint shareholders consecutively

Shareholders' details	Class and number of shares or amount of stock held	Shares or amount of stock transferred (if appropriate)	
		Class and number of shares or amount of stock transferred	Date of registration of transfer
Name MS AMRIK KAUR BAINS Address 25 DUNDONALD ROAD KENSAL RISE LONDON UK Postcode NW1 0 3 HP	ORD 2		
Name _____ Address _____ _____ _____ _____ UK Postcode _____			
Name _____ Address _____ _____ _____ _____ UK Postcode _____			