

APPOINTMENT of director or secretary

(NOT for resignation (use Form 288b) or change of particulars (use Form 288c))

Please complete in typescript, or in bold black capitals.

CHFP010

Company Number

4474832

Company Name in full

ABILITY PRODUCTS LIMITED

Appointment form

Notes on completion appear on next page.

Appointment as director

Day	Month	Year	† Date of Birth	Day	Month	Year
28	11	2003	19	04	19	49

as secretary Please mark the appropriate box. If appointment is as a director and secretary mark both boxes.

NAME * Style / Title

* Honours etc

Forename(s)

Alan Hector

Surname

Wenman

Previous forename(s)

Previous surname(s)

Usual residential address

10 South View

Post town

Great Dunmow

Postcode

CM6 1UQ

County / Region

Essex

Country

† Nationality

British

† Business occupation

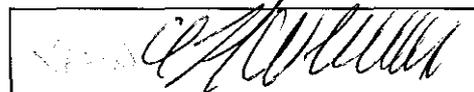
Company Director

† Other directorships (additional space next page)

See attached schedule

I consent to act as ** director / secretary of the above named company

Consent signature



Date

28/11/03

A director, secretary etc must sign the form below.

Signed



Date

28.11.03.

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

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.

Lesley B Glassberg, 15 Sandy Lodge Way, Northwood,

Middlesex, HA6 2AR

Tel

DX number

DX exchange

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



A43 *A56YBRL6* 0630
COMPANIES HOUSE 09/01/04

Company Number

4474832

† Directors only.

† Other directorships

NOTES

Show the full forenames, NOT INITIALS. If the director or secretary is a corporation or Scottish firm, show the name on surname line and registered or principal office on the usual residential line.

Give previous forenames or surname(s) except:

- for a married woman, the name by which she was known before marriage need not be given.
- for names not used since the age of 18 or for at least 20 years.

A peer or individual known by a title may state the title instead of or in addition to the forenames and surname and need not give the name by which that person was known before he or she adopted the title or succeeded to it.

Other directorships.

Give the name of every company incorporated in Great Britain of which the person concerned is a director or has been a director at any time in the past five years.

You may exclude a company which either is, or at all times during the past five years when the person concerned was a director, was

- dormant
- a parent company which wholly owned the company making the return, or
- another wholly owned subsidiary of the same parent company.



List of other directorships Schedule to form 288a

Please complete in typescript,
or in bold black capitals.

CHFP010

Company Number

4474832

Company Name in full

ABILITY PRODUCTS LIMITED

Name

Alan Hector Wenman

Company Name	Resignation
MEDICAL DEVICE MANAGEMENT LIMITED	