

Please complete in typescript, or in bold black capitals.

13/05/03

C

288a

APPOINTMENT of director or secretary (NOT for resignation (use Form 288b) or change

| HFP016 | of particulars (use Form 288c)) | | |
|--|--|--|--|
| Company Number | 4531716 | | |
| Company Name in full | LANTONS COFFEE CAR | | |
| | Day Month Year Day Month Year | | |
| Date of appointment | 11092002 t Date of birth 210141952 | | |
| Appointment Appointment as director | AS Secretary Please mark the appropriate box. If appointment is as a director and secretary mark both boxes. | | |
| NAME *Style / Title | Ms. *Honours etc | | |
| lotes on completion ppear on reverse. Forename(s) | JULIA CLARE | | |
| Surname | Huahes | | |
| Previous Forename(s) | Previous Surname(s) | | |
| Usual residential address | 3 Tow Court | | |
| Post town | NEWARK Postcode N4243TT | | |
| County / Region | Notes Country | | |
| † Nationality | BRITISH. # Business occupation MANAGER | | |
| † Other directorships (additional space overleaf) | | | |
| , | I consent to act as ** director / secretary of the above named company | | |
| Consent signature * Voluntary details. † Directors only. | Julia Haglez Date 11/9/02 | | |
| ** Delete as appropriate. | A director, secretary ete must sign the form below. | | |
| Signed | Date 11/9/02 | | |
| | (** a director / secretary / administrator / administrative receiver / receiver manager / receiver) | | |
| Please give the name, address, | Ashburton Registrars Limited | | |
| telephone number and, if available, a DX number and Exchange of | 12-14 St. Mary's Street, NEWPORT, | | |
| the person Companies House should contact if there is any query. | Shropshire TF10 7AB Tel 01952 270270 | | |
| | 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

| | Company Number | | 2 |
|------------------|-----------------------|---------------------|---|
| † Directors only | † Other directorships | NEWARK CAB | |
| | · | LINIQUE COFFEE BAR. | |
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NOTES

Show the full forenames, NOT INITIALS. If the director or secretary is a corporation or Scottish firm, show the name on sumame 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 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 5 years.

You may exclude a company which either is, or at all times during the past 5 years when the person 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.