In accordance with Section 89 of the Insolvency Act 1986.

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Notice of appointment of liquidator in a members' or creditors' voluntary winding up



TUESDAY



ease

A25 05/03/2019

COMPANIES HOUSE

use #79

		COMPANIES HOUSE
1	Company details	
Company number	0 4 9 6 7 6 2 5	→ Filling in this form
Company name in	Tesco TLB Pontypridd Limited	Please complete in typescript or in bold black capitals.
full		
2	Liquidator's name	
Full forename(s)	Richard	
Surname	Barker	
3	Liquidator's address	· · · · · · · · · · · · · · · · · · ·
Building name/numbe	_r 1	
Street	More London Place	
Post town	London	
County/Region		
Postcode	S E 1 2 A F	
Country		
4	Liquidator's email address or telephone number	You must give an email address or
Email Address	Rbarker@uk.ey.com	telephone number. All information on this form will appear on the public
Telephone number	020 7951 2000	record.
5	Insolvency practitioner number	
Number	1 7 1 5 0	
	transport of the state of the s	

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6	Liquidator's name								
Full forename(s)	Samantha Jane	Other Liquidator's details Use this section to tell us about							
Surname	Keen	another liquidator.							
7	Liquidator's address								
Building name/numb	er 1	Other Liquidator's details							
Street	More London Place Use this section to t about another liquid Use the continuation to tell us about more								
Post town	London	two liquidators.							
County/Region									
Postcode	S E 1 2 A F								
Country									
8	Liquidator's email address or telephone number	You must give an email address or							
Email Address	Skeen@uk.ey.com	telephone number. All information of this form will appear on the public							
Telephone number	020 7951 2000	record.							
9	Insolvency practitioner number								
Number	9 2 5 0								
10	Statement of appointment								
	I confirm the appointment of the liquidator(s) on								
Date	2 2 0 1 9								
11	Appointment details								
	The appointment was made by								
	(Tick one)								
	™ Company								
12	Type of liquidation								
	Tick to confirm the liquidation type Members								
	□ Creditors								
13	Sign and date								
Liquidator's signature	Signature X Mayorhu								
Signature date	0 1 0 3 2 0 1 9								

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ou do it will he on the form. Th isible to search	e con	tact i	nforr	natio	n you		•	•
Contact name Uba	id Mu	ıssa						
Company name Ernst &	k Your	ng						
Address 1 More	Lond	on Pl	ace			•		
			**		 .			
Post town Londo	1							
County/Region								
Postcode	S	E	1	2	Α	F		
Country	L	i	I	I	1	I		<u> </u>
DX							•	
Telephone 020 7	783 0	885						
✓ Checklis		-						

Please make sure you have remembered the

The company name and number match the information held on the public Register.

You have signed the form.

following:

Important information

All information on this form will appear on the public record.

Where to send

You may return this form to any Companies House address, however for expediency we advise you to return it to the address below:

The Registrar of Companies, Companies House, Crown Way, Cardiff, Wales, CF14 3UZ. DX 33050 Cardiff.

Further Information

For further information please see the guidance notes on the website at www.gov.uk/companieshouse or email enquiries@companieshouse.gov.uk

This form is available in an alternative format. Please visit the forms page on the website at www.gov.uk/companieshouse