



Companies House

AR01 (ef)

Annual Return



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X34WBMEX

Company Name: **NEWPORT PHARMACY (BOLTON) LIMITED**

Company Number: **05056992**

Date of this return: **26/02/2014**

SIC codes: **47730**

Company Type: **Private company limited by shares**

Situation of Registered Office: **61-65 NEWPORT STREET
BOLTON
LANCASHIRE
BL1 1NE**

Officers of the company

Company Secretary 1

Type: **Person**
Full forename(s): **MRS MAHERUNNISA AIYUB**

Surname: **MUNSHI**

Former names:

Service Address: **15 CHARLOTTE STREET
BLACKBURN
LANCASHIRE
BB1 7LE**

Company Director **1**

Type: **Person**

Full forename(s): **MRS ANISA AIYUB**

Surname: **MUNSHI**

Former names:

Service Address: **15 CHARLOTTE STREET
BLACKBURN
LANCASHIRE
BB1 7LE**

Country/State Usually Resident: **UNITED KINGDOM**

Date of Birth: **22/08/1973** *Nationality:* **BRITISH**

Occupation: **PHARMACIST**

Statement of Capital (Share Capital)

Class of shares	ORDINARY	<i>Number allotted</i>	100
		<i>Aggregate nominal value</i>	100
<i>Currency</i>	GBP	<i>Amount paid per share</i>	0
		<i>Amount unpaid per share</i>	0
<i>Prescribed particulars</i>			
VOTING RIGHTS			

Statement of Capital (Totals)

<i>Currency</i>	GBP	<i>Total number of shares</i>	100
		<i>Total aggregate nominal value</i>	100

Full Details of Shareholders

The details below relate to individuals / corporate bodies that were shareholders as at 26/02/2014 or that had ceased to be shareholders since the made up date of the previous Annual Return

A full list of shareholders for the company are shown below

Shareholding 1 : **30 ORDINARY shares held as at the date of this return**
Name: **TASNEEM MUNSHI**

Shareholding 2 : **30 ORDINARY shares held as at the date of this return**
Name: **MAHERUNNISA MUNSHI**

Shareholding 3 : **40 ORDINARY shares held as at the date of this return**
Name: **ANISA MUNSHI**

Authorisation

Authenticated

This form was authorised by one of the following:

Director, Secretary, Person Authorised, Charity Commission Receiver and Manager, CIC Manager, Judicial Factor.