

Please complete in typescript,

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

or in bold black capitals.			•	of	f part	iculai	rs (u:	se F	orm	288c	<i>))</i>		
CHWP000 Company Number			5313171				· <del>-</del>						
Co	SERVENT LIMITED												
		Date of	<u> </u>	Month	Year		†Dat	e of	 Day	 Mont	h	Year	
		appointment	0 5	1   2   2	0 (	0 6	Birth	י '		1			:
Appointment	† Appointi	ment as director	as secretary    V   Please mark the appropriate box. If appointment as a director and secretary mark both boxes.										ent is
	NAME	*Style / Title			urs etc			<u> </u>					
Notes on completion appear on reverse.	ı	Forename(s)	STARWELL INTERNATIONAL LTD.										
		Surname		<u>.</u>									
		Previous Forename(s)	Previous Surname(s)										
†† Tick this box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under the provisions of section 723B of the Companies Act 1985	†† Us	ual residential address	P.O. Box	.O. Box 853, Springates East, Government Road									
		Post town	Charlest	own				Posto	ode				
	C	County / Region						Cou	ntry [	IEVIS			
		†Nationality	†Business occupation										
(a		er directorships spare overleaf)	Loopcon	nt to act a	.c.** alim			of th	- ahov	e name	ed cor	nnany	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		ent signature	1	Mi	ueu	13/		Da -	ite	051			
† Directors only. **Delete as appropriate	Adirector, secretary etc must sign the form												
`	STELLAND.	uk signed		BROW	Zai,			Da	te	05	DEC	2006	
You do not have information in the			E A		\(\sigma\) \(\sigma\)								
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RIDA	*ASGP6M		DX number DX exchange										
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