



Companies House

AR01 (ef)

Annual Return



Received for filing in Electronic Format on the: **07/04/2016**

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Company Name: **CAB TOURS LIMITED**

Company Number: **05748947**

Date of this return: **20/03/2016**

SIC codes: **49390**

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

Situation of Registered Office: **SUITE 1, THE RIVERSIDE BUILDING LIVINGSTONE ROAD
HESSLE
NORTH HUMBERSIDE
HU13 0DZ**

Officers of the company

Company Director **1**

Type: **Person**
Full forename(s): **MR CARL ANDREW**

Surname: **BRUCE**

Former names:

Service Address: **76 WESTERN ROAD**
 GOOLE
 EAST YORKSHIRE
 DN14 6QL

Country/State Usually Resident: **ENGLAND**

Date of Birth: ****/05/1973** *Nationality:* **BRITISH**
Occupation: **COACH OPERATOR**

Statement of Capital (Share Capital)

Class of shares	ORDINARY	<i>Number allotted</i>	1
		<i>Aggregate nominal value</i>	1
<i>Currency</i>	GBP	<i>Amount paid per share</i>	0
		<i>Amount unpaid per share</i>	0
<i>Prescribed particulars</i>			
ORDINARY			

Statement of Capital (Totals)

<i>Currency</i>	GBP	<i>Total number of shares</i>	1
		<i>Total aggregate nominal value</i>	1

Full Details of Shareholders

The details below relate to individuals / corporate bodies that were shareholders as at 20/03/2016 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 : **1 ORDINARY shares held as at the date of this return**
Name: **CARL ANDREW BRUCE**

Authorisation

Authenticated

This form was authorised by one of the following:

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