

## 00 m 363a

Please complete in typescript, or in bold black capitals.

## **Annual Return**

CHFP000

Company number

Company name in full

|5761335

MANDA CHRISTENSEN (UK) LIMITED

Date of this return

The information in this return is made up to

Day Month Year

9 / 0 3 / 2 0 0

Day

Month

Year

Date of next return

If you wish to make your next return to a date earlier than the anniversary of this return please show that date here. Companies House will then send a form at the appropriate time.

9 / 0 |3 / |2 |0 |1 0

**Registered Office** 

Show here the address at the date of this return

Any change of registered office must be notified on form 287

Post town

County/Region

LEEDS

WEST YORKSHIRE

S

21-27 ST PAUL'S STREET

**UK Postcode** 

2 J |G

Principal business activities

Show trade classification code number(s) for the principal activity or activities

If the code number cannot be determined. give a brief description of principal activity

2954

IMANUFACTURE FOR TEXTILE

A21

03/04/2009

**COMPANIES HOUSE** 

200

When you have completed and signed the form please send it to the Registrar of Companies at:

Companies House, Crown Way, Cardiff, CF14 3UZ for companies registered in England or Wales

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB DX ED235 Edinburgh 1 For companies registered in Scotland

DX 33050 Cardiff

or LP-4 Edinburgh 2

Register of members		
If the register of members is n registered office, state here w		
-		
	Post town	
	County/Region	
	UK Postcode	
Register of Debenture	holders	
If there is a register of debenti duplicate of any such register		
is not kept at the registered of		
where it is kept	Post town	
· ·	County/Region	
	UK Postcode	
Company type		
Public limited company		
Private company limited	l by shares	
Private company limited share capital	I by guarantee with	out
Private company limited	l by shares exempt	under Please tick the appropriate box
section 30 Private company limited	l by guarantee exe	
under section 30		
Private unlimited compa	any with share capi	tal
Private unlimited compa	ny without share c	apital
Company Secretary		Details of a new company secretary must be notified on form 288a
* Voluntary details (Please photocopy this area to provide  * Voluntary details Nar	me *Style/Title	
details of joint secretaries).	Forename(s)	ANITHA
·		
†† Tick the box if the address shown is a		CARLSSON
service address for the beneficiary of a	Address ††	KARLSLUNDSGATAN 5
Confidentiality Order granted under section 723B of the Companies		523 35 ULRICEHAMN
Act 1985. Otherwise, give your usual residential address. In	Post town	SWEDEN
the case of a corporation or Scottish firm, give the	County/Region	SWEDEN 523 35
registered or principal office address.	UK Postcode	
If a partnership, give the		
names and addresses of the partners or the name of the partnership and office address	Country	SWEDEN
		Page 2

Directors Please list the directors in alphabetical order * Voluntary details In the case of a		Details of new directors must be notified on form 288a	
director that is a corporation or a	Name *Style/Title		
Scottish firm, the name is the		Day Month Year	
corporate or firm name	Date of birth	0 8 / 1 1 / 1 9 6 5	
	Forename(s)	JENS	
†† Tick the box if the address shown is a service address for the		ENGWALL	
	e Address ††	RADHUSGATAN 8	
beneficiary of a Confidentiality Order granted under section		523 35 ULRICEHAMN	
723B of the Companie Act 1985. Otherwise,	s Post town	SWEDEN	
give your usual residential address. In the case of a	County/Region	SWEDEN 523 35	
corporation or Scottis firm, give the registere			
or principal office address.	Country	SWEDEN	
	_	SWEDISH	
	Business occupation		
	•		
Directors Please list the directors * Voluntary details	in alphabetical order	Details of new directors must be notified on form 288a	
In the case of a director that is a corporation or a	Name *Style/Title		
Scottish firm, the name is the		Day Month Year	
corporate or firm name	Date of birth		
	Forename(s)		
†† Tick the box If the	Surname		
address shown is a service address for the	e Address ††		
beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985. Otherwise, give your usual residential address. In the case of a corporation or Scottish firm, give the registered or principal office address.			
	8		
	Country		
	Nationality		

Issue share capital Enter details of all the shares in issue at the date of this return	Class (e.g. Ordinary/Preference)	Number of shares issued	Aggregate Nominal Value (i.e. Number of shares issued multiplied by nominal value per share, or total amount of stock)
	ORDINARY		1.00
		L	
		L	
	L	<u>L</u>	
	Totals	1	1.00
Traded public companies A traded public company means a company any of whose shares are shares admitted to trading on a regulated market	Please tick this box if your conceptible company at any time of this return		
List of past and present shareholders (use attached schedule where appropriate)	Please tick the appropriate be	ox below:	On paper in another format
Private or non-traded public companies are required to provide a "full list" if one was not included with either of the last two returns.	A full list of shareholders for a company is enclosed. <b>Please</b>	e complete Schedule A.	<b>V</b>
Traded public companies are required to provide a list of shareholders who held at least 5% of the issued shares of any share class if a list was not provided with either of the last two	e a list of shareholders who enclosed. <b>Please complete Schedule B.</b> east 5% of the issued shares hare class if a list was not		
returns.	A list containing shareholder	changes is enclosed	
	→ For private or non-trad complete Schedule A		ase
	→ For traded public comp Schedule B	panies, <b>please complete</b>	
	There were no shareholder of	hanges in this period	
Certificate	Rertify that the information of knowledge and belief	given in this return is true t	to the best of my
Signed	10-8,m	<b></b> □	Pate 09-03-24
*Please delete as appropriate  When you have signed the return, send it with the fee to the Registrar of Companies. Make cheques payable to Companies House.	*(director / secretary)  This teturn includes (er	continuation sheets	
You do not have to give any contact information in the box opposite but if	LRACHEL WIND	E	
you do, it will help Companies House to contact you if there is a query on the	r SIMBOON WIN	aup	
form. The contact information that you give will be visible to searchers of the	L		
public record.	DX number 14098	DX exchange	505 HALL SQ
	•		Page 4

This must only be completed by private and public limited companies that have not traded on a regulated market

## Schedule A for private or non-traded public companies List of past and present shareholders

(Please	use	a continuation	on sheet	if required)
(				

Company number

|5761335

Company name in full

| AMANDA CHRISTENSEN (UK) LIMITED

- Changes to shareholders' particulars or details of the amount of stock or shares transferred must be completed each year
- > You must provide a "full list" of all company shareholders on:
  - The company's first annual return following incorporation
  - · Every third annual return after a full list has been provided
- List the company shareholders in alphabetical order or provide an index
- > List joint shareholders consecutively

## Do not give shareholder address information

	Class and number of	Shares or amount of stock transferred (if appropriate)		
Shareholder's name only	shares or amount of stock held	Class and number of shares or amount of stock transferred	Date of registration of transfer	
Name JENS ENGWALL	1 Ordinary Share	1 Ordinary Share	23/10/2008	
Name		1		
Name				
Name				
Name			_	
Name				
Name				
Name				
Name				
Name				
<u> </u>			<u> </u>	