Companies House

CS01 (ef)

Confirmation Statement

Company Name: **LABORATOIRES FORTE PHARMA UK LTD**
Company Number: **05830302**

Received for filing in Electronic Format on the: **27/04/2020**

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Company Name: **LABORATOIRES FORTE PHARMA UK LTD**

Company Number: **05830302**

Confirmation Statement date: **11/04/2020**

Sic Codes: **74990**

Principal activity description: **Non-trading company**

Statement of Capital (Share Capital)

Class of Shares:	**ORDINARY**	Number allotted	**1**
Currency:	**GBP**	Aggregate nominal value:	**1**

Prescribed particulars

EACH SHAREHOLDER SHALL BE ENTITLED TO RECEIVE NOTICE OF AND TO ATTEND AND SPEAK AT ANY GENERAL MEETING OF THE COMPANY AND HAVE ONE VOTE FOR EACH SHARE HELD BY HIM OR HER. ANY PROFITS WHICH THE COMPANY MAY DETERMINE TO DISTRIBUTE SHALL BE DISTRIBUTED AMONGST THE SHAREHOLDERS IN DUE PROPORTION TO THE NUMBER OF SHARES HELD ACCORDING TO THE AMOUNTS PAID UP ON THE SHARES ON WHICH THE DIVIDEND IS PAID. ON A RETURN OF ASSETS ON LIQUIDATION OR CAPITAL REDUCTION OR OTHERWISE, THE ASSETS OF THE COMPANY REMAINING AFTER THE PAYMENT OF ITS LIABILITIES SHALL BE DISTRIBUTED AMONGST THE SHAREHOLDERS IN DUE PROPORTION TO THE NUMBER OF SHARES HELD.

Statement of Capital (Totals)

Currency:	**GBP**	Total number of shares:	**1**
		Total aggregate nominal value:	**1**
		Total aggregate amount unpaid:	**0**

Full details of Shareholders

The details below relate to individuals/corporate bodies that were shareholders during the review period or that had ceased to be shareholders since the date of the previous confirmation statement.

Shareholder information for a non-traded company as at the confirmation statement date is shown below

Shareholding 1: **1 ORDINARY shares held as at the date of this confirmation statement**
Name: **LABORATOIRES FORTE PHARMA S A M**

Confirmation Statement

I confirm that all information required to be delivered by the company to the registrar in relation to the confirmation period concerned either has been delivered or is being delivered at the same time as the confirmation statement

Authorisation

Authenticated

This form was authorised by one of the following:

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