



Companies House

**AP01** (ef)

**Appointment of Director**



X3YXS9WB

*Company Name:* **TRIPLE WEST MEDICAL LIMITED**

*Company Number:* **06338025**

*Received for filing in Electronic Format on the:* **12/01/2015**

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*New Appointment Details*

*Date of Appointment:* **14/11/2014**

*Name:* **MR GUROL MAHMUT KURT**

*Consented to Act:* **YES**

*Service Address recorded as Company's registered office*

*Country/State Usually Resident:* **ENGLAND**

*Date of Birth:* **27/05/1979**

*Nationality:* **BRITISH**

*Occupation:* **MANAGING DIRECTOR**

*Former Names:*

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## *Authorisation*

*Authenticated*

*This form was authorised by one of the following:*

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