

nlna

363a

Please complete in typescript, or in bold black capitals.

## **Annual Return**

CHFP000

Company number

Company name in full

6445650

PANTS TO POVERTY

1.70

Date of this return

The information in this return is made up to

Month

Year

3111212008

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.

Day Month

Day

Year

**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

**UK Postcode** 

THE HOS

5 TORRENS ST

19LINGTON

LONDON

Registrar of Companies at:

ECIV ING

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

MANUFACTURING & SETCING FAIRTRADE UNDERWEGER FOR MEN & WOMEN

SATURDAY



A44

10/01/2009 COMPANIES HOUSE

224

Companies House, Crown Way, Cardiff, CF14 3UZ for companies registered in England or Wales or Companies House 37 Castle Terrace Edinburgh EH1 25

Companies registered in England or Wales or Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB For companies registered in Scotland

When you have completed and signed the form please send it to the

DX 33050 Cardiff

DX ED235 Edinburgh 1 or LP-4 Edinburgh 2

Register of members If the register of members is not kept at the	
registered office, state here where it is kept	
Post town	
County/Re <b>g</b> ion	
UK Postcode	
Register of Debenture holders	
If there is a register of debenture holders, or a duplicate of any such register or part of it, which	
is not kept at the registered office, state here where it is kept	
Post town	
County/Region	
UK Postcode	
Company type	
Public limited company	
Private company limited by shares	
Private company limited by guarantee with share capital	nout
Private company limited by shares exemp section 30	t under Please tick the appropriate box
Private company limited by guarantee exe	mpt
under section 30  Private unlimited company with share cap	ital
Private unlimited company without share of	capital
Company Secretary  * Voluntary details	Details of a new company secretary must be notified on form 288a
(Please photocopy this area to provide Name *Style/Title	e Miss
details of joint secretaries). Forename(s	HEDI SUSAN
†† Tick the box if the Surname	e HOEFINGER
service address for the beneficiary of a Address †	+ 62 C BONHAM ROAD
Confidentiality Order granted under section 723B of the Companies	BRIXTON
Act 1985. Otherwise, give your usual Post town	n
residential address. In the case of a corporation	( TO TIPM)
or Scottish firm, give the registered or principal office address.  County/Region Coun	0 10 \$ 511 6
If & partnership, give the	. 21.4
names and addresses of Country the partners or the name of the partnership and	/
office address	
1	

Page 2

<ul> <li>Voluntary details</li> </ul>	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 Scottish firm, the	Name *Style/Title	
name is the corporate or firm	Date of birth	Day Month Year  1 6 0 4 1 9 7
†† Tick the box if the address shown is a service address for the	Forename(s)	BEN CARLTON
	Surname	RAMSDEN
	Address ††	62 C BONHAM ROAD
beneficiary of a Confidentiality Order granted under section	,	
723B of the Compani Act 1985. Otherwise,	es Post town	BRIXTON
give your usual residential address. I the case of a	County/Region	randan
corporation or Scottish firm, give the registered or principal office		LISMIZ ISIHIG
address.	Country	UL
	Nationality	BR171SH
	Business occupation	DIRECTOR
Directors Please list the director * Voluntary details In the case of a	s in alphabetical order	Details of new directors must be notified on form 288a
	Name *Style/Title	1
director that is a corporation or a Scottish firm, the name is the	Name *Style/Title	Day Month Year
corporation or a	Name *Style/Title  Date of birth	Day Month Year
corporation or a Scottish firm, the name is the corporate or firm	•	Day Month Year
corporation or a Scottish firm, the name is the corporate or firm name	Date of birth Forename(s) Surname	Day Month Year
corporation or a Scottish firm, the name is the corporate or firm name  †† Tick the box if the address shown is a service address for the	Date of birth Forename(s) Surname he Address ††	Day Month Year
corporation or a Scottish firm, the name is the corporate or firm name  †† Tick the box if the address shown is a service address for t beneficiary of a Confidentiality Orde granted under sectio 723B of the Compan	Date of birth Forename(s) Surname he Address ††	Day Month Year
corporation or a Scottish firm, the name is the corporate or firm name  †† Tick the box if the address shown is a service address for t beneficiary of a Confidentiality Orde granted under sectio 723B of the Compan Act 1985. Otherwise give your usual	Date of birth Forename(s) Surname he Address ††	Day Month Year
corporation or a Scottish firm, the name is the corporate or firm name  †† Tick the box if the address shown is a service address for t beneficiary of a Confidentiality Orde granted under sectio 723B of the Compan Act 1985. Otherwise give your usual residential address. the case of a corporation or Scott	Date of birth Forename(s) Surname Address †† Post town County/Region	Day Month Year
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corporation or a Scottish firm, the name is the corporate or firm name   †† Tick the box if the address shown is a service address for t beneficiary of a Confidentiality Orde granted under sectio 723B of the Compan Act 1985. Otherwise give your usual residential address. the case of a corporation or Scott firm, give the registe or principal office	Date of birth Forename(s) Surname Address †† Post town County/Region Sh red UK Postcode	Day Month Year
corporation or a Scottish firm, the name is the corporate or firm name   †† Tick the box if the address shown is a service address for t beneficiary of a Confidentiality Orde granted under sectio 723B of the Compan Act 1985. Otherwise give your usual residential address. the case of a corporation or Scott firm, give the registe or principal office	Date of birth Forename(s) Surname Address †† Post town County/Region Shred UK Postcode	Day Month Year

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)	
	Landinory-	<u> </u>		
	Totals	L		
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 copublic company at any time of this return	mpany was a traded luring the period of		
List of past and present shareholders (use attached schedule where appropriate)	Please tick the appropriate bo	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 private or non-traded public company is enclosed. Please complete Schedule A.			
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	A list of shareholders holding shares of any share class for enclosed. Please complete s	a traded public company i	s	
provided with either of the last two returns.	A list containing shareholder  → For private or non-trace	led public companies, plea	ase	
complete Schedule A  → For traded public companies, please complete Schedule B				
	There were no shareholder of	changes in this period		
Certificate	I certify that the information knowledge and belief	given in this return is true t	to the best of my	
Signed	Total Control	D	Pate 31 12/04	
*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.	This return includes (e	continuation sheets	•	
You do not have to give any contact information in the box opposite but if you do, it will help Companies House to contact you if there is a query on the form. The contact information that you give will be visible to searchers of the	bon Opa Mobile -	intstopwer 0779323	\ 1	
public record.	DX number	DX exchange	Page 4	

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

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

Company number	1 644 56 50 (Please use a continuation sheet if required)				
Company name in full	19ANTS TO POWERTY LTD				

- 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

Do not dive suatemorder address imprimation				
	Class and number of shares or amount of stock held	Shares or amount of stock transferred (if appropriate)		
Shareholder's name only		Class and number of shares or amount of stock transferred	Date of registration of transfer	
Name			, [	
BEN RAMSDEN	(		5/12/07	
Name	•		, ,	
Name				
Name				
Name				
			<u> </u>	
Name				
			<u> </u>	
Name				
Name				
Name			ļ	

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