

CHANGE OF PARTICULARS for director or

Please complete in typescript, or in bold black capitals.		(NOT for appointment (use Form 288a) or resignation (use Form 288b)
CHFP010	Company Numb	er 6594694
Company Name in full		C&C ALPHA HEALTH CONSULTANCY AND MANAGEMENT LIMITED
Changes of particulars form	Complete in all cases	Day Month Year Date of change of particulars 1 7 1 2 2 0 0 8
	Name * Style / T	tie MR * Honours etc
	Forename	S) CHERIAN PADINJARETHALAKAL
	Surna	ne THOMAS
	† Date of Bi	Day Month Year th 1 8 1 2 1 9 5 9
Change of name (enter new name)	Forename	(s)
	Surna	ne
Change of usua	l residential address	2 WARREN MEWS, OATLAND CHASE
(enter new address)	Post to	vn WEYBRIDGE
	County / Reg	on SURREY Postcode KT13 9GX
	Cour	try
Other Change	(please spec	fy)
		A serving director, secretary etc must sign the form below.
* Voluntary details. Signed † Directors only.		ed Malandin Town Made Malandin Million
** Delete as appropriat	ate.	(**director/ secretary/ administrator/ administrative receiver/ receiver manager/ receiver)
Please give the name, address, telephone number and, if available, a DX number and Exchange of the person Companies House should contact if there is any query.		THE PLUTTE DUMINISON GIVE. THE PLUME I DUMINIST STREET.
SHOULD COMMOUNT	mere is any query.	Tel Tel: 020 7399 3100 Fax: 020 7408 2435



When you have completed and signed the form please send it to the Registrar of Companies at: DX 33050 Cardiff

DX exchange

Companies House, Crown Way, Cardiff, CF14 3UZ

for companies registered in England and Wales

DX number

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB for companies registered in Scotland DX 235 Edinburgh