

# 600

## Notice of appointment of liquidator in a members' or creditors' voluntary winding up



Companies House

For further information, please refer to  
our guidance at  
[www.gov.uk/companieshouse](http://www.gov.uk/companieshouse)

### 1 Company details

Company number 0 7 2 7 7 4 8 9

Company name in full D. PINK INVESTMENTS LIMITED

→ Filling in this form  
Please complete in typescript or in  
bold black capitals.

### 2 Liquidator's name

Full forename(s) HARJINDER

Surname JOHAL

### 3 Liquidator's address

Building name/number 601

Street HIGH ROAD LEYTONSTONE

Post town LONDON

County/Region

Postcode E 1 1 4 P A

Country

### 4 Liquidator's email address or telephone number <sup>1</sup>

Email address h.johal@ashcrofts.co.uk

Telephone number 020 8556 2888

<sup>1</sup> You must give an email address or  
telephone number. All information  
on this form will appear on the  
public record.

### 5 Insolvency practitioner number

Number 9 1 7 5

600

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**6 Liquidator's name**<sup>1</sup>

Full forename(s)	
Surname	

**1 Other Liquidator's details**  
Use this section to tell us about another liquidator.

**7 Liquidator's address**<sup>2</sup>

Building name/number	
Street	
Post town	
County/Region	
Postcode	
Country	

**2 Other Liquidator's details**  
Use this section to tell us about another liquidator. Use the continuation page to tell us about more than two liquidators.

**8 Liquidator's email address or telephone number**<sup>3</sup>

Email address	
Telephone number	

**3** You must give an email address or telephone number. All information on this form will appear on the public record.

**9 Insolvency practitioner number**

Number							
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**10 Statement of appointment**

I confirm the appointment of the liquidator(s) on

Date	<sup>d</sup> 1	<sup>d</sup> 8	<sup>m</sup> 0	<sup>m</sup> 2	<sup>y</sup> 2	<sup>y</sup> 0	<sup>y</sup> 2	<sup>y</sup> 2
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**11 Appointment details**

The appointment was made by (Tick one)

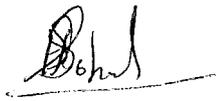
- Company
- Creditors

**12 Type of liquidation**

Tick to confirm the liquidation type

- Members
- Creditors

**13 Sign and date**

Liquidator's signature	Signature <b>X</b>  <b>X</b>
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Signature date	<sup>d</sup> 2	<sup>d</sup> 2	<sup>m</sup> 0	<sup>m</sup> 2	<sup>y</sup> 2	<sup>y</sup> 0	<sup>y</sup> 2	<sup>y</sup> 2
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600

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 **Presenter information**

You do not have to give any contact information, but if you do it will help Companies House if there is a query on the form. The contact information you give will be visible to searchers of the public record.

Contact name

Company name **ASHCROFTS**

Address **601 HIGH ROAD LEYTONSTONE**

Post town **LONDON**

County/Region

Postcode 

E	1	1		4	P	A
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Country

DX

Telephone **020 8556 2888**

 **Checklist**

We may return forms completed incorrectly or with information missing.

Please make sure you have remembered the following:

- The company name and number match the information held on the public Register.
- You have signed and dated the form.

 **Important information**

All information on this form will appear on the public record.

 **Where to send**

You may return this form to any Companies House address, however for expediency we advise you to return it to the address below:

The Registrar of Companies, Companies House,  
Crown Way, Cardiff, Wales, CF14 3UZ.  
DX 33050 Cardiff.

 **Further information**

For further information please see the guidance notes on the website at [www.gov.uk/companieshouse](http://www.gov.uk/companieshouse) or email [enquiries@companieshouse.gov.uk](mailto:enquiries@companieshouse.gov.uk)

This form is available in an alternative format. Please visit the forms page on the website at [www.gov.uk/companieshouse](http://www.gov.uk/companieshouse)