

# AR01 (ef)

#### **Annual Return**



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Company Name: MAJG LIMITED

Company Number: 08004311

*Date of this return:* 23/03/2016

*SIC codes:* **41100** 

Company Type: Private company limited by shares

Situation of Registered

Office:

NORTH LODGE CLIFTON PARK AVE

SHIPTON RD

YORK N YORKS YO30 5YX

Officers of the company

Company Director	I
Type:	Person MR MICHAEL ANTHONY JOHN
Full forename(s):	WIN WHICHAEL ANTHONY JOHN
Surname:	GREEN
Former names:	
Service Address recorded	l as Company's registered office
Country/State Usually Re	sident: ENGLAND
Date of Birth: **/05/1963  Occupation: DIRECTOR	Nationality: BRITISH
Company Director	2
Type:	Person
Full forename(s):	WENDY ANN
Surname:	GREEN
Former names:	
Service Address recorded	l as Company's registered office
Country/State Usually Re	sident: UNITED KINGDOM
Date of Birth: **/11/1964	Nationality: BRITISH
Occupation: DIRECTOR	

### Statement of Capital (Share Capital)

Class of shares	ORDINARY	Number allotted	10
Currency	GBP	Aggregate nominal value	10
		Amount paid per share	1
		Amount unpaid per share	0

Prescribed particulars

THE SHARES HAVE ATTACHED TO THEM FULL VOTING, DIVIDEND AND CAPITAL DISTRIBUTION, INCLUDING ON WINDING UP, RIGHTS AND ARE NOT REDEEMABLE.

Statem	ent of Capi	tal (Totals)		
Currency	GBP	Total number of shares	10	
		Total aggregate nominal value	10	

## Full Details of Shareholders

The details below relate to individuals / corporate bodies that were shareholders as at 23/03/2016 or that had ceased to be shareholders since the made up date of the previous Annual Return

A full list of shareholders for the company are shown below

Shareholding 1 : 5 ORDINARY shares held as at the date of this return

5 shares transferred on 2014-12-19

Name: MICHAEL ANTHONY JOHN GREEN

Shareholding 2 : 5 ORDINARY shares held as at the date of this return

Name: WENDY ANN GREEN

#### Authorisation

Authenticated

This form was authorised by one of the following:

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