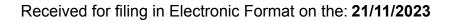




Confirmation Statement

XCGR1YOR

Company Name: ALLIED HEALTH PROFESSIONALS SERVICES LTD 09139552



Company Name: ALLIED HEALTH PROFESSIONALS SERVICES LTD

Company Number: 09139552

Confirmation **19/11/2023**

Statement date:

Confirmation Statement

I confirm that all information required to be delivered by the company to the registrar in relation to the confirmation period concerned either has been delivered or is being delivered at the same time as the confirmation statement

Authorisation

Authenticated

This form was authorised by one of the following:

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