

Confirmation Statement

Company Name: DR. OTTO LABORATORIES LTD

Company Number: 09312415

Received for filing in Electronic Format on the: 24/11/2016



X5KGOL0P

Company Name: DR. OTTO LABORATORIES LTD

Company Number: 09312415

Confirmation 14/11/2016

Statement date:

Statement of Capital (Share Capital)

Class of Shares: ORD Number allotted 100

Currency: GBP Aggregate nominal value: 100

Prescribed particulars

FULL RIGHTS WITH REGARDS TO VOTING, PARTICIPATION AND DIVIDENDS

| Statement of | of Cap | oital (T | otals) |
|--------------|--------|----------|--------|
| | | | |

Currency: GBP Total number of shares: 100

Total aggregate nominal 100

value:

Total aggregate amount 100

unpaid:

Persons with Significant Control (PSC)

PSC notifications

Notification Details

Date that person became 06/04/2016

registrable:

Name: MR MORKEL JACQUES OTTO

Service Address: 104 OAK ROAD

TIPTREE

COLCHESTER

ENGLAND CO5 0NA

Country/State Usually

Resident:

ENGLAND

Date of Birth: **/09/1957

Nationality: BRITISH

Nature of control

The person holds, directly or indirectly, more than 25% but not more than 50% of the shares in the company.

Notification Details

Date that person became 06/04/2016

registrable:

Name: MS AMANDA OTTO

Service Address: 104 OAK ROAD

TIPTREE

COLCHESTER ENGLAND CO5 0NA

Country/State Usually

Resident:

ENGLAND

Date of Birth: **/11/1959

Nationality: BRITISH

Nature of control

The person holds, directly or indirectly, more than 25% but not more than 50% of the shares in the company.

Confirmation Statement

| Commination 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

| | | | | | | | ed |
|----|----|----|----------|----|----|-------|--------|
| /\ | | TP | 1 | nt | - | · つ T | \sim |
| ~ | LJ | | 15 | | н. | .aı | C |

This form was authorised by one of the following:

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