



Confirmation Statement

Company Name: **AL HEALTHCARE SERVICES LIMITED**

Company Number: **10092070**



Received for filing in Electronic Format on the: **18/04/2017**

X64L8UVU

Company Name: **AL HEALTHCARE SERVICES LIMITED**

Company Number: **10092070**

Confirmation **30/03/2017**

Statement date:

Sic Codes: **86210**

Principal activity description: **General medical practice activities**

## Statement of Capital (Share Capital)

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<b>Class of Shares:</b>	<b>ORDINARY</b>	Number allotted	<b>1</b>
Currency:	<b>GBP</b>	Aggregate nominal value:	<b>1</b>

Prescribed particulars

**FULL RIGHTS TO RECEIVE NOTICE OF, ATTEND AND VOTE AT GENERAL MEETINGS.  
ONE SHARE CARRIES ONE VOTE, AND FULL RIGHTS TO DIVIDENDS AND CAPITAL  
DISTRIBUTIONS (INCLUDING UPON WINDING UP).**

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## Statement of Capital (Totals)

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Currency:	<b>GBP</b>	Total number of shares:	<b>1</b>
		Total aggregate nominal value:	<b>1</b>
		Total aggregate amount unpaid:	<b>0</b>

## Full details of Shareholders

The details below relate to individuals/corporate bodies that were shareholders during the review period or that had ceased to be shareholders since the date of the previous confirmation statement.

Shareholder information for a non-traded company as at the confirmation statement date is shown below

Shareholding 1:	<b>1 ORDINARY shares held as at the date of this confirmation statement</b>
Name:	<b>ALKETA LICOLLARI</b>

# Persons with Significant Control (PSC)

## PSC notifications

### Notification Details

Date that person became **06/04/2016**  
registrable:

Name: **DR ALKETA LICOLLARI**

Service Address: **39 HILL STREET  
MAYFAIR  
LONDON  
ENGLAND  
W1J 5LZ**

Country/State Usually  
Resident: **ENGLAND**

Date of Birth: **\*\*/09/1970**

Nationality: **ITALIAN**

### Nature of control

The person holds, directly or indirectly, 75% or more of the shares in the company.

The person holds, directly or indirectly, 75% or more of the voting rights in the company.

The person has the right, directly or indirectly, to appoint or remove a majority of the board of directors of the company.

## **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