



## Appointment of Director

Company Name: **MAA HEALTHCARE LIMITED**

Company Number: **11024127**



Received for filing in Electronic Format on the: **17/02/2022**

XAY05GT5

### New Appointment Details

Date of Appointment: **13/02/2022**

Name: **MR RAMAKRISHNA PORANDLA**

The company confirms that the person named has consented to act as a director.

Service Address: **67 ELMER GARDENS  
ISLEWORTH  
ENGLAND  
TW7 6EZ**

Country/State Usually Resident: **ENGLAND**

Date of Birth: **\*\*/05/1982**

Nationality: **INDIAN**

Occupation: **DIRECTOR**

## **Authorisation**

### **Authenticated**

**This form was authorised by one of the following:**

**Director, Secretary, Person Authorised, Administrator, Administrative Receiver, Receiver, Receiver manager, Charity Commission Receiver and Manager, CIC Manager, Judicial Factor**