

CHWP000

This form should be completed in black
This notice must be delivered to the Registrar within 21 days of the alteration being made

Return of change of person authorised to accept service or to represent the branch of an overseas company or of any change in their particulars

(Pursuant to Schedule 21A, paragraph 7(1) of the Companies Act 1985)

Company number

Branch number

FC 021285

Company name

Branch name
(if different to corporate name)

FIROKA (LONDON PARK) LIMITED

TERMINATION OF AUTHORITY

See overleaf for appointments and change of particulars

Date of termination

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

Position vacated
(Mark appropriate box(es))

- ☐ Person authorised to accept service on the company's behalf
- ☐ Person authorised to represent the company at the branch

Complete these details for resignation of any person authorised to accept service or process on the company's behalf or who was authorised to represent the company in relation to the business of the branch

Name

Address

You do not have to give any contact information in the box opposite but if you do, it will help Companies House to contact you if there is a query on the form. The contact information that you give will be visible to searchers of the public record

(10/03)

Tel

When completed, this form should be delivered to the address on page 4



APPOINTMENT

Persons authorised to represent the company or who may accept service or process

Give the name and address of the person appointed, together with the date of appointment. Mark the box(es) relevant to the appointment. If the appointment is to both positions mark both boxes

☐ Tick this box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under the provisions of section 723B of the Companies Act 1985

* Delete as appropriate

SCOPE OF AUTHORITY

Give brief particulars of the extent of the powers exercised (e.g. whether they are limited to powers expressly conferred by the instrument of appointment, or whether they are subject to express limitations). Where the powers are exercised jointly give the name(s) of the person(s) concerned

Mark box(es) as appropriate

* Style / Title

Ms

Forenames

ANNE

Surname

LOWRY

Address **

1, KINGS CROSS ROAD
LONDON

Post town

LONDON

County / Region

Postcode WC1X 9HX

☐ Is authorised to accept service of process on the company's behalf

* AND/OR

☒ Is authorised to represent the company in relation to that business

Date of appointment

Day Month Year

01 08 2008

The authority to represent the company is -

Is # ☐ Authorised to accept service of process on the company's behalf

* AND/OR

Is # ☒ Authorised to represent the company in relation to that business

The extent of the authority to represent the company is - (give details)

Limited to powers expressly conferred by the instrument of appointment. The powers are to be exercised jointly with Mr FIROZ A KASSAM

These powers -

☐ May be exercised alone

OR

☒ Must be exercised with -

(Give name(s) of co-authorised person(s))

Mr FIROZ A KASSAM.

CHANGE OF PARTICULARS

Mark the appropriate box. If change relates to both positions mark both boxes

Change of name

Name previously notified to Companies House

New name

Change of residential address ¹¹ (enter new address)

¹¹ Tick this box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under the provisions of section 723B of the Companies Act 1985

☐

Change of authority to act

(this part does not apply to a person authorised to accept service on behalf of the company)

Give brief particulars of any change in the authority of the officer to represent the company, including any alteration to the manner in which the existing or new powers may be exercised (e.g. requiring them to be exercised with other persons)

Mark appropriate box

Date of

Day	Month	Year
14	08	2008

- ☐ Change of particulars of person authorised to accept service
☐ Change of particulars of person authorised to represent the company

Forenames FIROZ ALIBHAI
Surname KASSAM
Forenames _____
Surname _____
Address B60 MEMMO CENTER
4 AVENUE DES GUELFES
Post town MONACO
County / Region MONACO Postcode 98000
Country MONACO

The extent of the authority of the above person to represent the company has been altered to - [give details]

The powers -

- # ☐ May be exercised alone
OR
☐ Must be exercised with (Give name(s) of co authorised person(s))

Signature

Signed

Handwritten signature

/ Permanent represent

* (director / Secretary)

Date

14-8-08

* Delete as applicable

When completed, this form should be delivered to -

For branches registered in England and Wales

The Registrar of Companies
Companies House
Crown Way
Cardiff
CF14 3UZ

For branches registered in Scotland

The Registrar of Companies
Companies House
37 Castle Terrace
Edinburgh
EH1 2EB

DX 235 Edinburgh
or LP - 4 Edinburgh 2