

# OS AP05

**BLUEPRINT****2000**

Appointment by an overseas company of a person  
authorised to represent the company as a  
permanent representative in respect of a  
UK establishment

☒ **What this form is for**  
You may use this form to appoint  
a person authorised to represent  
the company in respect of the UK  
establishment

☒ **What this form is NOT for**  
You cannot use the form  
any other appointment

**WEDNESDAY**

\*L1EE3PYW\*

LD2

01/08/2012

#104

COMPANIES HOUSE

## 1 Overseas company details

Company number F C 0 2 4 3 5 2

Company name in full  
or alternative name as  
registered in the UK Mega Brands Europe

→ **Filling in this form**  
Please complete in typescript or in  
bold black capitals

All fields are mandatory unless  
specified or indicated by \*

## 2 UK establishment details

UK establishment  
number B R 0 0 6 9 2 3

UK establishment  
name in full Mega Brands Europe

## 3 Date of appointment of new person authorised

Date of appointment <sup>d</sup>0 <sup>d</sup>5 <sup>m</sup>0 <sup>m</sup>7 <sup>y</sup>2 <sup>y</sup>0 <sup>y</sup>1 <sup>y</sup>2

## 4 Details of new person authorised

Title\* Ms

Full forename(s) Isabelle Valentine

Surname Van Moortel

Former name(s) ①

### ① Former name(s)

Please provide any previous names  
which have been used for business  
purposes in the past 20 years

Married women do not need to give  
former names unless previously used  
for business purposes

Continue in Section 8 if required

## 5 Service address of new person authorised ②

Please complete the service address below. You must also complete the usual  
residential address of the person authorised in Section 5a

Building name/number 7

Street Geemhof

Post town Hamme

County/Region

Postcode 9 2 2 0

Country Belgium

### ② Service address

This is the address that will appear  
on the public record. This does not  
have to be your usual residential  
address

If you provide your residential  
address here it will appear on the  
public record

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6

### Authority of new person authorised

Please enter the extent of your authority as person authorised Please tick one box		<b>1</b> If you have indicated that the extent of your authority is limited, please provide a brief description of the limited authority in the box below  <b>2</b> If you have indicated that you are not authorised to act alone but only jointly, please enter the name(s) of the person(s) with whom you are authorised to act below
Extent of authority	<input checked="" type="checkbox"/> Limited <b>1</b> <input type="checkbox"/> Unlimited	
Description of limited authority, if applicable	Represents Company individually as authorised by the Board	
	Are you authorised to act alone or jointly? Please tick one box  <input checked="" type="checkbox"/> Alone <input type="checkbox"/> Jointly <b>2</b>	
If applicable, name(s) of person(s) with whom you are acting jointly		

7

### Signature

Signature	<div>Signature</div> <div>X  X</div> <div>This form may be signed and authorised by Director, Secretary, Permanent representative</div>	
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8

### Additional former name(s) (continued from Section 4)

Former name(s) <b>1</b>	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	<b>1</b> Additional former name(s) Use this space to enter any additional names
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### Presenter information

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

Contact name

Company name

Address

Post town

County/Region

Postcode

Country

DX

Telephone



### Checklist

**We may return forms completed incorrectly or with information missing**

**Please make sure you have remembered the following**

- ☐ The company name and number as registered in the UK match the information held on the public Register
- ☐ You have completed the date of appointment
- ☐ You have provided both the service address and the usual residential address
- ☐ Addresses must be a physical location. They cannot be a PO Box number (unless part of a full service address), DX or LP (Legal Post in Scotland) number
- ☐ You have included all former names used for business purposes over the last 20 years
- ☐ You have enclosed a relevant higher protection application if applying for this at the same time as completing this form
- ☐ You have entered the extent of authority of the new person authorised in Section 6
- ☐ You have signed the form



### Important information

**Please note that all information on this form will appear on the public record, apart from information relating to usual residential addresses**



### Where to send

**You may return this form to any Companies House address**

#### England and Wales

The Registrar of Companies, Companies House,  
Crown Way, Cardiff, Wales, CF14 3UZ  
DX 33050 Cardiff

#### Scotland

The Registrar of Companies, Companies House,  
Fourth floor, Edinburgh Quay 2,  
139 Fountainbridge, Edinburgh, Scotland, EH3 9FF  
DX ED235 Edinburgh 1  
or LP - 4 Edinburgh 2 (Legal Post)

#### Northern Ireland

The Registrar of Companies, Companies House,  
Second Floor, The Linenhall, 32-38 Linenhall Street  
Belfast, Northern Ireland, BT2 8BG  
DX 481 N R Belfast 1

#### Higher protection

If you are applying for, or have been granted, higher protection, please post this whole form to the different postal address below  
The Registrar of Companies, PO Box 4082,  
Cardiff, CF14 3WE



### Further information

For further information, please see the guidance notes on the website at [www.companieshouse.gov.uk](http://www.companieshouse.gov.uk) or email [enquiries@companieshouse.gov.uk](mailto:enquiries@companieshouse.gov.uk)

**This form is available in an alternative format. Please visit the forms page on the website at [www.companieshouse.gov.uk](http://www.companieshouse.gov.uk)**