In accordance with Section 1046 of the Companies Act 2006 & Regulation 13 of the Overseas Companies Regulations 2009.

OS AP01

Appointment of director of an overseas company



✓ What this form is for You may use this form to appoint an individual as a director of an overseas company. What this form is You cannot use the a corporate direct company. To do the OS AP02 'Appointredirector of an over



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Overseas company details → Filling in this form Company number 3 0 C 0 3 Please complete in typescript or in Company name in full **HUTCHISON BIOFILM MEDICAL SOLUTIONS LIMITED** bold black capitals. or alternative name as All fields are mandatory unless registered in the UK specified or indicated by ' Date of director's appointment 2 ^m1 | ^m0 ^y2 | ^y0 | ^y1 Date of appointment °3 ∣°0 New director's details 3 • Former name(s) Please provide any previous names Title* (including maiden or married names) which have been used for business Full forename(s) Edmond Wai Leung purposes in the last 20 years. Continue in Section 8 if required. Surname HO Country/State of residence Former name(s) • This is in respect of your usual residential address as stated in Country/State of United Kingdom Section 4a. residence @ Month and year of birth Nationality British Please provide month and year only. Provide full date of birth in Month/year of birth 6 ^m4 0 ⁷ 5 section 3a. **Business occupation** Business occupation Director (if any) 9 If you have a business occupation, please enter here. If you do not, please leave blank. New director's service address 9 Please complete your service address below. You must also complete your usual Service address residential address in Section 4a. This is the address that will appear on the public record. This does not Building name/number **Hutchison House** have to be your usual residential Street 5 Hester Road If you provide your residential address here it will appear on the public record. Post town Battersea County/Region London Postcode W 4 Α Ν Country United Kingdom

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Director's authority												
Please enter the extent of your authority as director. Please tick one box.						If you have indicated that the extent						
	p li	of your authority is limited, please provide a brief description of the limited authority in the box below. 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.										
Laws or the Memorandum and Articles of Association required to be exercised by the members of the Company. Are you authorised to act alone or jointly? Please tick one box.	jo											
☐ Alone ☑ Jointly ●		-										
with a second director												
CHOW Kong Ting or LEUNG Chi Wai or Dan ELDAR or												
Christopher HUANG												
UK establishments												
A return must be delivered in respect of any alteration to the company particulars by each UK establishment. If, however, a company has more than UK establishment, it may deliver only one form in respect of all those UK establishments, provided it completes the table below.												
UK establishment name	istrat	stration number										
HUTCHISON BIOFILM MEDICAL SOLUTIONS LIMITED	В	R	0	1	8	1	4	5				
Signature X C HUANG	X	·										
This form may be signed and authorised by: Director, Secretary, Permanent representative.												
Additional former name(s) (continued from Section 3)												
	. ι	Additional former names Use this space to enter any additional names.										
	Please enter the extent of your authority as director. Please tick one box. Umited Unlimited	Please enter the extent of your authority as director. Please tick one box. Limited	Please enter the extent of your authority as director. Please tick one box. Ulimited	Please enter the extent of your authority as director. Please tick one box. Unlimited Unlimited	Please enter the extent of your authority as director. Please tick one box. Director	Please enter the extent of your authority as director. Please tick one box. Umited	Please enter the extent of your authority as director. Please tick one box. Imited Imite	Please enter the extent of your authority as director. Please tick one box. Director, Secretary, Permanent representative.				

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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	Mr N	lark	Harr	is			•			
Company name Baker & McKenzie LLP Ref MOH										
					-					
Address 100 New Bridge St										
,										
					-					
Post town	Lon	don								
County/Region										
Pastcode		E	С	4	V		6	J	Α	
Country	Uni	ted h	Cinge	dom						
DX	233	Cha	ince	ry L	ane					
Telephone	+44	20	7919	183	37					

√ 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 included all former names used for business purposes over the last 20 years.
- ☐ You have completed the nationality box in Section 3.
- ☐ You have provided a correct date of birth.
- You have provided a business occupation if there is
- 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 enclosed a relevant higher protection application if applying for this at the same time as completing this form.
- You have entered the extent of the director's authority in Section 6.
- You have completed Section 6, if applicable.
- ☐ 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 and day of birth.

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.gov.uk/companieshouse or email enquiries@companieshouse.gov.uk

This form is available in an alternative format. Please visit the forms page on the website at www.gov.uk/companieshouse