

**LP363** 

**Annual Return of a Limited Liability Partnership** 

Pleas e complete in typescript, or in bold black capitals.

CHVVP000	LLP Numbe	r 00306560
	Full Name of Limited Liability Partnershi	1 100 C01900K11199 KN
	Date of this retur The information in this return is made up	m 1,9 0,1 2,0,0,6
re th	Date of next returned wish to make your necturn on a date earlier that e anniversary of this returned ease show the date here	xt Day Month Year
Any change of registered office must be notified of Form LLP287.	Regist ered Office Show here the address	1 1/11/11/20 11/11/12 14/13/15/2
	as at the date of	of 2 THIN INC MIDDLE STORET
	Post tow	
•	Count	Postcode EIW IYX
	Regist er o Debenture Holders	
If there is a regist debenture holders,		
duplicate of any register or part	such Post tow	n
which is not kept a registered office,	at the Count state Count	y UK Postcode
here where it is kep	t List members	on page 2
	Certificate	As a designated member 1 certify that the information given in this return is true to the best of my knowledge and belief.
	Signe	Date 7. 1. 66 Designated Member
with the fee to the	signed the return send e Registrar of Companies d be made payable e.	. This return includes continuation sheets.

26/01/2006 **COMPANIES HOUSE** 

Registrar of Companies at:

Companies House, Crown Way, Cardiff, CF14 3UZ

DX 33050 Cardiff

for partnerships registered in England and Wales

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB DX 235 Edinburgh for partnerships registered in Scotland

or LP - 4 Edinburgh2

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Please list members	in alphabetical order	
In the case of a member that is a corporation or a		Details of new members must be notified on form LLP288a
Scottish firm, the name is the	Surname or Corporate Name	5 CHNEG BERGER
corporate or firm name.	Forename(s)	HANS MARTIN
= Tick this box if the address shown is a service address for the beneficiary of a Confidentiality	Address ==	BAUMGARTENSTRASSE 12
		LANGENTHAL 4900
Order granted under section 723B of the	Post town	
Companies Act 1985 otherwise, give your usual residen-	County / Region	UK Postcode
tial address. In the case of a corpora- tion or Scottish	Country	SWITZGRLAND Tick box if designated member
firm, give the regis- tered or principal office address.		
		Dough Marks Volum
	Member Reference Number *(as advised	25869 Date of Birth 1,40,5 1,9,5,5
* Voluntary information	by Companies House)	
<b>Members</b> Please list members	in alphabetical order	
In the case of a member that is a corporation or a		Details of new members must be notified on form LLP288a
Scottish firm, the name is the	Surname or Corporate Name	SCHNEE BERGER
corporate or firm name.	Forename(s)	MANNAZ
= Tick this box if	Address ==	BAUM GARTENSTRASSE 12
the address shown is a service address for the beneficiary		LANGENTHAL 4900
of a Confidentiality Order granted under section 723B of the	Post town	
Companies Act 1985 otherwise, give your	County / Region	UK Postcode
usual residential address. In the case of a corpora- tion or Scottish firm, give the registered or principal office address.	Country	SWITZGRLAND Tick box if designated member
	Member Reference Number *(as advised by Companies House)	Day Month Year  25870 Date of Birth 221111957

Members

\* Voluntary information