

Companies House

R-17/830

LLP363

		05-08-2009
— for the Please complete in or in bold black ca	typescript,	Annual Return of a Limited Liability Partnership
CHWP000	LLP Numbe	
Full Name of Limited Liability Partnership		
	Date of this return the information in this return is made up t	n 2 18 0 17 2 10 10 19
If you retu the a	Date of next return wish to make your new rn on a date earlier that inniversary of this return ase show the date here	t Day Month Year 2 8 0 7 2 0 1 0
Any change of registered office must be notified on Form LLP287.	Registered Office Show here the address as at the date o this return	A CT MATURATIONAL HOUSE
	Post town	
	County	UK E1W 1UN Postcode
Register of Debenture Holders		
If there is a register debenture holders, or duplicate of any su register or part of which is not kept at t registered office, sta here where it is kept	r a ch Post tow it, the Count	
nere where it is kept	List members	on page 2
Certificate A		As a designated member I certify that the information given in this return is true to the best of my knowledge and belief.
	Signe	Date 28/07/2009 For and on behalf of Filmar SpA Designated Member
When you have signed the return send it with the fee to the Registrar of Companies.		
C CONTROL OF CHICAGO HAT BY THE CONTROL OF CHICAGO		When you have completed and signed the form please send it to the

05/08/2009 LD2 COMPANIES HOUSE Registrar of Companies at:

Companies House, Crown Way, Cardiff, CF14 3UZ

DX 33050 Cardiff or

for partnerships registered in England and Wales Companies House, 139 Fountainbridge Edinburgh, EH3 9FF

DX 235 Edinburgh or LP - 4 Edinburgh 2 for partnerships registered in Scotland

Please list members	in alphabetical order	
In the case of a member that is a corporation or a Scottish firm, the name is the corporate or firm name.		Details of new members must be notified on form LLP288a
	Surname or Corporate Name	ALFORD TRADING LIMITED
	Forename(s)	
the address shown is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the	Address **	2ND FLOOR, EUROPA CENTRE
		ST. ANNE STREET
	Post town	FLORIANA FRN 1400
Companies Act 1985 otherwise, give your usual residen-	County / Region	UK Postcode
tlai address. In the case of a corpora-	Country	MALTA Tick box if designated member
tion or Scottish firm, give the regis- tered or principal office address.		
		Day Month Year
	Member Reference Number *(as advised	Date of Birth
* Voluntary	by Companies House)	
Information		
Members		
	in alphabetical order	
In the case of a member that is a		Details of new members must be notified on form LLP288a
corporation or a Scottish firm, the name is the	Surname or Corporate Name	FILMAR SPA
corporate or firm name.	Forename(s)	
** Tick this box if	Address **	VIA DE GASPERI 83
the address shown is a service address for the beneficiary		
of a Confidentiality Order granted under section 723B of the	Post town	25030 ERBUSCO - BS
Companies Act 1985 otherwise, give your	County / Region	UK Postcode
usual residential address. In the case of a corpora-	Country	Tick box if designated member
tion or Scottish firm, give the registered or principal office address.		
		Day Month Year
	Member Reference	
	Number *(as advised	Date of Birth

Members

* Voluntary information

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Please list members in alphabetical order In the case of a Details of new members must be notified on form LLP288a member that is a corporation or a Surname or Scottish firm, the INTERYARN KKF Corporate Name name is the corporate or firm Forename(s) name. ^{††} Tick this box if Address ** 9700 SZOBATHELY the address shown is a service address for the beneficiary of a Confidentiality Order granted under BASTORI ISTVAN 2. FSZ 6. Post town section 723B of the **Companies Act** UK 1985 otherwise, give County / Region Postcode your usual residential address. In the Tick box if designated member case of a corpora-Country **HUNGARY** tion or Scottish firm, give the registered or principal office address. Day Month Year Member Reference Date of Birth Number *(as advised by Companies House) * Voluntary information Members Please list members in alphabetical order In the case of a Details of new members must be notified on form LLP288a member that is a corporation or a Scottish firm, the Surname or Corporate Name name is the corporate or firm Forename(s) name. Address ** # Tick this box if the address shown ls a service address for the beneficiary of a Confidentiality Order granted under Post town section 723B of the UΚ Companies Act 1985 County / Region otherwise, give your Postcode usual residential Tick box if designated member address. In the Country case of a corporation or Scottish firm, give the registered or principal office address. Month Day Year Member Reference Date of Birth Number *(as advised

by Companies House)

* Voluntary information

Members

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