

Annual Return of a Limited

Please complete in typescript, or in bold black capitals.		Liability Partnership					
CHWP000	LLP Number	00333109					
= :	ull Name of Limited iability Partnership	MENDEN LLP					
_	lability Partilership	Day Month Voor					
т	Date of this return he information in this return is made up to	301112008					
retu the a	Date of next return uses wish to make your next urn on a date earlier than anniversary of this return ease show the date here.	Day Month Year					
Any change of registered office must be notified on Form LLP287.	Registered Office Show here the address	CORNER CHAMBERS					
	as at the date of thi s return.	590A KINGSBURY ROAD					
	Post town	BIRMINGHAM					
	County	WEST MIDLANDS UK Postcode B24 9ND					
	Register of Debenture Holders						
If there is a registe debenture holders, of duplicate of any s register or part of	or a uch Post town						
which is not kept at registered office, st here where it is kept	('Aunti	UK Postcode					
·	List members o	on page 2					
	Certificate	As a designated member I certify that the information given in this return is true to the best of my knowledge and belief.					
	Signed	Date 24, 12.8					
When you have signed the return send it with the fee to the Registrar of Companies. Cheques should be made payable to		This return includes continuation sneets.					
		When you have completed and signed the form please send it to the Registrar of Companies at:					

COMPANIES HOUSE

Companies House, Crown Way, Cardiff, CF14 3UZ

for partnerships registered in England and Wales

or Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB DX 235 Edinburgh

for partnerships registered in Scotland

or LP - 4 Edinburgh 2

DX 33050 Cardiff

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	AMATUS CAPITAL GROUP LIMITED COMPANY							
corporate or firm name.	Forename(s)						<u> </u>		
Tick this box if the address shown	Address **	HENVILLE BUILDING							
is a service address for the beneficlary of a Confidentiality		MAIN STREET							
Order granted under section 723B of the	Post town	CHARLESTOWN							
Companies Act 1985 otherwise, give your usual residen- tial address. In the case of a corpora- tion or Scottish	County / Region	NEVIS UK Postcode							
	Country	ST KITTS & NEVIS Tick box if designated member				ember	V		
firm, give the regis- tered or principal office address.									
onice address.		·							
	Member Reference		1		Day	Month	Ye	ar	
	Number *(as advised by Companies House)		Date	of Birth					
* Voluntary information									
Manakawa				_	/				
Members Please list 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	NORDIC INVESTMENT GROUP LIMITED COMPANY							
corporate or firm name.	Forename(s)								
[#] Tick this box if	Address **	HENVILLE BUILDING							
the address shown is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985 otherwise, give your usual residential address. In the case of a corporation or Scottish firm, give the registered or principal office address.		MAIN STREET							
	Post town	CHARLESTOWN							
	County / Region	NEVIS UK Postcode							
	Country	ST KITTS & NEVIS	T	Fick box if	desig	nated me	ember		
	Member Reference			!	Day	Month	Yea	ar	
	Number *(as advised		Date o	of Birth	1				
* Voluntary	by Companies House)		•	L_		_1	1 1		

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