

01/05/2009

COMPANIES HOUSE

Please complete in typescript.

Office Of LLP363

Annual Return of a Limited

or in bold black capitals.		Liability Partnership	
CHWP000	LLP Number		
Full Name of Limited Liability Partnership		1	
1	Date of this return The information in this return is made up to	2 3 0 4 2 0 0 9	
ret the	Date of next return u 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 as at the date of this return.	PSS Suite, 27 Old Gloucester Street	
	Post town	London	
	County	Postcode WC1N 3XX	
	Register of Debenture Holders		
If there is a registe debenture holders, of duplicate of any s register or part o which is not kept at registered office, s here where it is kept	or a uch Post town f it, the	UK Postcode	
	List members o	on page 2	
	Certificate Signed	As a designated member I certify that the information given in this return is true to the best of my knowledge and belief. Date	
	_	Designated Member	
When you have signed the return send it with the fee to the Registrar of Companies.		This return includes 0 continuation sheets.	
₩ *AVJ269HM*		When you have completed and signed the form please send it to the Registrar of Companies at: Companies House, Crown Way, Cardiff, CF14 3UZ 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 Edinburgh 2

Please list members	s 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	Solemex Project Ltd		
corporate or firm name.	Forename(s)			
†† Tick this box if the address shown	Address ^{††}	#1, Mapp Street		
is a service address for the beneficiary of a Confidentiality				
Order granted under section 723B of the	Post town	Belize City		
Companies Act 1985 otherwise, give your usual residen-	County / Region	UK Postcode		
tial address. In the case of a corpora- tion or Scottish	Country	Belize	Tick box if designated member	
firm, give the regis- tered or principal office address.				
	Member Reference		Day Month Year	
	Number *(as advised by Companies House)		Date of Birth	
* Voluntary information	, , , ,			
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	Interproject Inc		
corporate or firm name.	Forename(s)			
** Tick this box if	Address **	#1, Mapp Street		
the address shown is a service address for the beneficiary				
of a Confidentiality Order granted under section 723B of the	Post town	Belize City		
Companies Act 1985 otherwise, give your	County / Region		Postcode	
usual residential address. In the case of a corpora-	Country	Belize	Tick box if designated member	
tion or Scottish firm, give the registered or principal office address.				
			Day Month Year	
	Member Reference		Date of Birth	
	Number *(as advised		Date of Diffit	

Members .

* Voluntary information