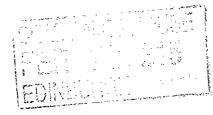


Please complete in typescript, or in bold black capitals.



363a

		Annual Return
Со	mpany Number	SC 169117
SCT *S49YN3UN COMPANIES HOUSE	full * 500 19/02/98	ELLORED CONSULTANTS LIMITED
Date of this return The information in this retu		Day Month Year
Date of next red If you wish to make to a date earlier than of this return please shouse will at the appropriate time.	your next return the anniversary now the date here.	Day Month Year
Registered Office of Show here the address this return.		UNIT 1, 9/15 DOUGLAS STREET DUNDEE
Any change of registered office must be notified on form 287.	Post town County / Region Postcode	DUNDEE SCOTLAND DOISAJ
Principal business (See note 4) Show trade classification for the principal activity If the code number can give a brief description	on code number(s) or activities. not be determined,	NOT TRADING AT PRESENT TIME

Companies House receipt date barcode

When you have completed and signed the form please send it to the Registrar of Companies at:

Companies House, Crown Way, Cardiff, CF4 3UZ DX 33050 Cardiff for companies registered in England and Wales

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

Register of me If the register of m registered office, s	nembers is i	not kept at the							
] Bastanda				
		ounty / Region					Postcode		
Register of De	benture	holders				·			
(See note 6) If there is a register of debenture holders and it is not kept at the registered office, state here where it is kept.									
		Post town							
	Co	ounty / Region					Postcode		
Company type	(See note	7)							
Public limited company									
Private company lim	ited by share	es							
Private company lim share capital	ited by guara	antee without							
Private company limi section 30	ted by share	s exempt under	Please mark the appropriate box						
Private company limited by guarantee exempt under section 30			:						
Private unlimited cor	npany with s	share capital							
Private unlimited company without share capital									
Company Seci	etary (see	e notes 8)	Details of a	new co	mpany :	secretary	must be no	tified on forn	n 288a.
(Please photocopy this area to provide details of joint secretaries).	Name	* Style / Title	MISS			*}	lonours etc		
secretaries).		Forename(s)	LORNA						
		Surname	HAND	1					
* Voluntary details.	Previous	Previous forename(s)							
	Previou	is surname(s)				· · · · · · · · · · · · · · · · · · ·			
Address			18 KINGSLAY PLACE						
Usual residential	•					**	·		
address must be given. In the case of a	!	Post town	DUNG	DEE.					
corporation, give the registered or principal	Co	unty / Region	DUNA				Postcode	0038	
office address.		Country	SCOT	-					

DIRECTORS (see notes 8)		Details of new director	ors must be notified on for	rm 288a	1									
Please list directors in alphabetical order. Name * Style / Title		wiec.	Day	Month	Year									
·	* Honours etc	11/100	 Date of birth	13	06	68								
	Forename(s)				100	00								
		10/2017												
	Surname	HAND	HAND											
	Previous forename(s)													
	Previous surname(s)													
,	Address	PG KINGSWAY	ARE											
Usual residential														
address must be given. In the case of a	Post town	DUNDEE												
corporation, give the registered or principal office address.		-	Postcode	003	87x									
	Country	SCOTLAND	Nationality											
1	Business occupation	CONSULTANT												
(Other directorships	LOREGEL ASSOCIATES LIMITED												
* Voluntary details.		EDELLOR LTD												
			•											
!	Name * Style / Title	MR		Day	Month	Year								
	* Honours etc		Date of birth	10	01	36								
	Forename(s)	ANTHONY FOUN												
	Surname	PWMB												
	Previous forename(s)													
	Previous surname(s)													
	Address	60 BROWN STREET												
Usual residentia	I	DUNDEE												
address must be given. In the case of a	a Post towr	DUNDEE												
corporation, give the registered or principa office address.		TAYSICE	Postcode	00	1 5A0)								
onice address.	Country	SCOTLAND	Nationality	BR	MSH.									
	Business occupation	GO DIRECTO	R											
	Other directorships	EOELLOR LI	MITED											
		ABLEOARN	ABLEOARN LIMITED											

Directors (continued)			Details of new directors must be notified on form 288a								
Name * Style / Title		* Style / Title			Day	Month	Year				
		* Honours etc	D	ate of birth							
		Forename(s)				<u>.</u>					
		Surname					<u> </u>				
	Previo	ous forename(s)		,							
	Previ	ous surname(s)				<u> </u>					
Address											
Usual residential											
address must be given. In the case of a		Post town									
corporation, give the registered or principal office address.	C	County / Region		Postcode							
office address.		Country		Nationality							
Вι	usines	s occupation									
Ot	her di	rectorships									
* Voluntary details.											
Na	ame	* Style / Title		_	Day	Month	Year				
		* Honours etc	Da	ate of birth							
		Forename(s)									
		Surname									
	Previo	us forename(s)									
Previous surname(s) Address											
Usual residential											
address must be given. In the case of a		Post town									
corporation, give the registered or principal	C	County / Region		Postcode							
office address.		Country		Nationality							
Ві	usines	s occupation									
Ot	ther di	rectorships									

(e.g. Ordinary/Preference) shares issued **Nominal Value** Issued share capital (see note 9) (i.e Number of shares issued Enter details of all the shares in issue multiplied by nominal value per share) at the date of this return. ORDINARY 1000 - 00 1000 Totals 1000 - 0 1000 List of past and present members There were no changes in the period (Use attached schedule where appropriate) A full list is required if one was not included with either of the last two returns. in another format on paper (see note 10) A list of changes is enclosed A full list of members is enclosed If at the date of this return an election is in force to dispense with **Elective resolutions** annual general meetings, mark this box (Private companies only) (See note 11) If at the date of this return an election is in force to dispense with laying accounts in general meetings, mark this box I certify that the information given in this return is true to the best of my Certificate knowledge and belief. Date 16/2/98 Signed † a director /secretary † Please delete as appropriate. When you have signed the return send it This return includes continuation sheets. with the fee to the Registrar of Companies. Cheques should be made payable to (enter number) Companies House. Please give the name, address, telephone number, and if available, BEAUMONT SCHOFIELD +CO a DX number and Exchange, for DILIPPER DICCONSON STREET, the person Companies House should contact if there is any query. Tel OP42 ANCS WYIZAC DX number DX exchange

Class

Number of

Aggregate

Directors (continued)			Details of new directors must be notified on form 288a								
	Name	* Style / Title					Day	Month	Year		
		* Honours etc			Da	te of birth					
Forename(s)						·					
		Surname		-							
	Previou	ıs forename(s)									
	Previo	us surname(s)									
Address											
Usual residentia	ı										
address must be given. In the case of a	a	Post town									
corporation, give the registered or principal office address.		ounty / Region				Postcode					
omoc address.		Country				Nationality					
	Business	occupation									
ı	Other dire	ectorships									
* Voluntary details											
					1						
ı	Name	* Style / Title					Day	Month	Year		
		* Honours etc			Dat	te of birth					
		Forename(s)									
Surname Previous forename(s) Previous surname(s)											
							·				
	Address										
Usual residentia address must be		5									
given. In the case of a corporation, give the	i a	Post town				·					
registered or principa office address.	i Co	ounty / Region				Postcode					
_	D	Country				Nationality 					
		occupation	}								
(Other dire	ectorships	\					 			

Details of new directors must be notified on form 288a