

Please complete in typescript, or in bold black capitals.

CHFP010

Company Number

	20	2	
COMPANIES A		) 3	d
Tax Sans Sans			
EDINBURGH			

SC162639	

**Annual Return** 

Company	Name	in	ful

Alba	Health	Limited		 	 		_
		<del>_</del>				 	 

Date	of	this	returr	1
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The information in this return is made up

Day	Month	Year
1 2	0 1	2 0 0 3

## Date of next return

If you wish to make your next return to a date earlier than the anniversary of this return please show the date here. Companies House will then send a form at the appropriate time.

Day	Month	Year	
3 0	0 9	2 0 0 3	3

## Registered Office

Show here the address at the date of this return.

Any change of registered office must be notified on form 287.

Post town

County / Region

UK Postcode

EDINBURGH

Miller House, 18 South Groathill Avenue

## Principal business activities

Show trade classification code number(s) for the principal activity or activities.

_

If the code number cannot be determined, give a brief description of principal activity.



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 companies registered in England and Wales

DX 33050 Cardiff

EH4 2LW

1 4521

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

Register of members If the register of members is not kept at the registered office, state here where it is kept.  Post town  County / Region	
Register of Debenture holders If there is a register of debenture holders, or a duplicate of any such register or part of it, which is not kept at the registered office, state where it is kept.  Post town	
County / Region	UK Postcode
Company type	
Public limited company  Private company limited by shares	
Private company limited by guarantee without share capital Private company limited by shares exempt under section 30 Private company limited by guarantee exempt under section 30 Private under section 30 Private unlimited company with share capital Private unlimited company without share capital	Please tick the appropriate box
Company Secretary	Details of a new company secretary must be notified on form 288a.
this area to provide <b>Name</b> * Style / Title details of joint	
* Voluntary details.	Pamela June
If a partnership give Surname the names and addresses of the partners or the name of the partnership and office address.	Smyth Hillside House
Usual residential address must be Post town	L Fool care chan
address must be Post town given. In the case of a corporation, County / Region	200100ma orian
give the registered or principal office Country address	



Directors Please list directors in a	ilphabetical order.	Details of new directors must be notified on form 288a
N	lame * Style / Title	Mr
Directors In the		Day Month Year
case of a director that is a corporate	Date of birth	
or a Scottish firm, the name is the	Forename(s)	Keith Manson
corporate or firm name.	Surname	Miller
A	ddress	Cherry Hollows, 1(b) Easter Belmont Road
Usual residential		
address must be given. In the case of a corporation,	Post town	EDINBURGH
give the registered or principal office	County / Region	UK Postcode EH12 6EX
address.	Country	Nationality British
Business occupation		Company Director
* Voluntary details.		
N	ame * Style / Title	<u></u>
Directors In the case of a director	Date of birth	Day Month Year
that is a corporate or a Scottish firm,	Forename(s)	
the name is the corporate or firm name.	Surname	
	ddress	
Usual residential		1
address must be given. In the case of a corporation,	Post town	
give the registered or principal office	County / Region	UK Postcode
address.	Country	
	Business occupation	



Issued share capital Enter details of all the shares in issue at the date of this return.	Class (e.g. Ordinary/Preference)	Number of shares issued	Aggregate Nominal Value (i.e. Number of shares issued multiplied by nominal value per share, or total amount of stock)
ORINDARY			£2.00
	Totals		2.00
List of past and present shareho (use attached schedule where appropriate) A full list is required if one was not included with either of the last two	olders There were no change	s in the period X	er in another format
returns.	A list of changes is end A full list of shareholde	closed	
Certificate	I certify that the inform knowledge and belief.	ation given in this return i	s true to the best of my
† Please delete as appropriate.	† a director / secretary	Dat	e 30-1-03
When you have signed the return send it with the fee to the Registrar of Companies. Cheques should be made payable to Companies House.	This return inc	eludes 1 (enter number)	continuation sheets.
Please give the name, address, telephone number and, if available, a DX number	Company Secretar	y, The Miller Group	Limited, Miller
and Exchange of the person Companies House should contact if there is any query		Groathill Avenue, E	dinburgh, EH4 2LW
		Tel [	

DX number \_\_\_\_\_DX exchange \_\_\_\_\_

Rlueprint 2000 Company Secretary



## areholders form 363a

Company Secretary		List of past and present sh Schedule to
CHFP010	Company Number	SC162639

Company Name in full | Alba Health Limited

- > Changes to shareholders particulars or details of the amount of stock or shares transferred must be completed each year
- You must provide a "full list" of all the company shareholders on:
  - The company's first annual return following the incorporation;
  - Every third annual return after a full list has been provided
- List the company shareholders in alphabetical order or provide an index
- List joint shareholders consecutively

	Shares or amount of stock transferred (if appropriate)		
Shareholders' details	Class and number of shares or amount of stock held	Class and number of shares or amount of stock transferred	Date of registration of transfer
Name The Miller Group Limited	£1.00 ORINDARY		
Address Miller House, 18 South Groathill Avenue, EDINBURGH		!	
	Shares Held		
UK postcode EH4 2LW			
Name			
Address			٠
UK postcode			
Name			
Address			
UK postcode			