

363a

# **Annual Return**

	A KINITOLOGIA I CO COLLA I
Company Number	1342230
Company Name in full	FULLEON LIMITED
* F 3 6 3 A C 5 0 *	
Date of this return (See note 1) The information in this return is made up to	Day Month Year 25 10 98
Date of next return (See note 2)  If you wish to make your next return to a date earlier than the anniversary of this return please show the date here.	Day Month Year

25

**OX16 7RX** 

3162

Registered Office (See note 3) Show here the address at the date of this return.

Companies House will then send a form

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

at the appropriate time.

Post town

County / Region

Postcode

**SOUTHAM ROAD BANBURY** OXON

### Principal business activities

(See note 4) Show trade classification code number(s) for the principal activity or

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




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

<b>\</b>		
•	nbers is not kept at the	100 NEW BRIDGE STREET
registered office, sta	te nere where it is	
	Post town	LONDON
	County / Region	Postcode EC4V 6JA
Register of Debe (See note 6) If there is a register of and it is not kept at t state here where it is	of debenture holders he registered offfice, kept.	
	Post town	
	County / Region	Postcode
Company type	(See note 7)	¬
Public limited compan	у	
Private company limit	ed by shares	x
Private company limit	ed by guarantee without	
Private company limit section 30	ed by shares exempt unde	er Please mark the appropriate box
Private company limit under section 30	ed by guarantee exempt	
Private unlimited com	pany with share capital	
Private unlimited com	pany without share capita	
Company Secre	tary (See notes 1-5)	Details of a new company secretary must be notified on form 288a.
(Please photocopy this area to provide	lame *Style / Title	*Honours etc
details of joint secretaries).	Forename(s)	
* Voluntary details.	Surname	ABOGADO NOMINEES LIMITED
	Previous Forename(s)	
	Previous Surname	
Α	ddress	100 NEW BRIDGE STREET
Usual residential		
address must be given. In the case of a		
corporation, give the registered or principal	Post town	LONDON
office address.	County / Region	Postcode EC4V 6JA
	Country	

#### **Directors**

#### Details of new directors must be notified on form 288a Name \*Style / Title Day Month Year Date of birth \*Honours etc 21 11 68 Forename(s) **KIERON TREVOR NEIL CHAPMAN** Surname Previous forename(s) Previous surname(s) **Address 4 DEAN COURT HENLLYS** Usual residential address must be given. In the case of a corporation, give the **CWMBRAN** Post town registered or principal office address County / Region **GWENT** Postcode NP44 6EN Country **BRITISH** Nationality **Business occupation** MARKETING DIRECTOR Other directorships \* Voluntary details. Name \*Style / Title Day Month Year \*Honours etc 14 08 Date of birth 44 Forename(s) **JAMES ERIC SCRIMSHAW** Surname Previous forename(s) Previous surname(s) **Address WEST LAUGHTON FARMHOUSE** LAUGHTON Usual residential address must be given. In the case of a corporation, give the **SLEAFORD** Post town registered or principal office address County / Region LINCS Postcode NG34 OHD **BRITISH** Country Nationality **Business occupation COMPANY DIRECTOR** Other directorships (See continuation sheet)

## **Directors**

#### Details of new directors must be notified on form 288a

	Name	*Style / Title					Day	Month	Year_
		*Honours etc			Date o	of birth	19	03	60
Forename(s)			THOMAS STEWART		J				ı
		Surname	STRONG		/ /				
	Previou	s forename(s)						<u> </u>	
	Previo	us surname(s)							
	Addres	s	136 VICTORIA AVENUE		1				
Usual residential address must be given. In the case of a corporation, give the			DODTIOANI						
registered or princi	pal	Post town	PORTHCAWL						
	Co	ounty / Region	MID GLAMORGAN		Postcode	CF36 3F	IA		
		Country			Nationality	BRITISH			
	Busines	s occupation	ACCOUNTANT						
		directorships							
* Voluntary details.	Name	*Style / Title					Dav	Month	Year
		*Honours etc			Date of	of birth			, , ,
		Forename(s)							
		Surname							
	Previou	s forename(s)							
	Previou	us surname(s)							
	Addres	s [							
Usual residentia address must be		[		<u>.</u>					
given. In the case of corporation, give the	ne	Post town							
registered or princi office address		ounty / Region			Postcode			···	
		Country			Nationality				
	Busines	s occupation					<del></del>	<del></del>	
		directorships					:		

## Form 363a continuation sheet

## Other directorships

1342230

Company Name FULLEON LIMITED

JAMES ERIC SCRIMSHAW	
Other Current Directorships	
AEROCHARTER (COVENTRY) LIMITED	
B & S FUSES LIMITED	
COOPER PENSIONS LIMITED	

### List of past and present members Schedule to form 363a and 363b

1342230

**Company Number** 

Company Name in fu	II FULLEON LIMITI	ED		
	or amount of stock held by exisitng mem	stock held by first return, since the incorporation of t exisitng members company) by at date of this (a) persons who are still members, an		
Name and address	Number or amount currently held	Number or amount Transferred	Date of registration of transfer	Remarks
MENVIER GROUP PLC				
SOUTHAM ROAD, BANBURY, OXON, OX16 7RX				
Ordinary Shares	40000			

. Issued share capital (see note 9) 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)

			, , , , , , , , , , , , , , , , , , , ,
	Ordinary Shares	40000	£ 40000.00
	Totals	40000	£ 40000.00
List of past and present m	Those	nges in the period	
A full list is required if one was no included with either of the last two	t	on par	per in another format
(see note 10)	A list of changes is	s enclosed	
	A full list of membe	ers is enclosed X	
Elective resolutions (Private companies only) (see note 11)	If at the date of this retu	rn an election is in force annual general meeting	to dispense with s, mark this box
	If at the date of this retu laying acc	rn an election is in force counts in general meeting	to dispense with is, mark this box
Certificate	I certify that the infor knowledge and belief	mation given in this retur	rn is true to the best of my
† Please delete as appropriate.	Signed t/a director /secretary	Date	e 25 October 98
When you have signed the return with the fee to the Registrar of Corcheques should be made payable Companies House.	mpanies. This return inc	(enter number)	ontinuation sheets
Please give the name, address, telephone number, and if available, a DX number and Exchange, for the person Companies House should contact if there is any query	100 NEW BRIDGE ST LONDON EC4V 6JA Ref: WJS/DGP Tel: 0171 919 1859	<b>L</b>	