



Companies House

for the record

Please complete in typescript,  
or in bold black capitals.

CHFP000

001064/120

363a

## Annual Return

Company Number 02595193

Company Name in full ALL THINGS MEDICAL LIMITED

### Date of this return

The information in this return is made up to

Day Month Year

25/02/2008

### 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

25/02/2009

### Registered Office

Show here the address at the date of  
this return.

THE MILL HOUSE

WINCHESTER ROAD

BISHOPS WALTHAM

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

Post town

County / Region

HANTS

UK Postcode

SO32 1AH

### Principal business activities

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

7011

8512

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

TUESDAY



\*A915WCP3\*

A21

25/08/2009

178

COMPANIES HOUSE

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

Companies House, Crown Way, Cardiff, CF14 3UZ

DX 33050 Cardiff

for companies registered in England and Wales

or

Companies House, 139 Fountainbridge, Edinburgh, EH3 9FF

DX 235 Edinburgh

for companies registered in Scotland

or LP - 4 Edinburgh 2

## 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

UK Postcode

## 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 here 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 unlimited company with share capital

Private unlimited company without share capital

☐☒☐☐☐☐☐

Please tick the appropriate box

## Company Secretary

\* Voluntary details.

(Please photocopy this area to provide details of joint secretaries).

Name

\* Style / Title

Forename(s)

Surname

Address \*\*

☐

Post town

County / Region

Country

Details of a new company secretary must be notified on form 288a.

ATM TRAVEL SERVICES LIMITED

THE MILL HOUSE

WINCHESTER ROAD

BISHOPS CATHAL

HANTS

UK

UK Postcode

S032

1A4

\*\* Tick this box if 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.

If a partnership give the names and addresses of the partners or the name of the partnership and office address.

## Directors

Please list directors in alphabetical order.

Details of new directors must be notified on form 288a

**Directors** In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.

**\*\* Tick this box if 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.**

Name	* Style / Title			
		Day	Month	Year
Date of birth		21/06/1961		
Forename(s)		KRYSZTOF JOZEF		
Surname		NICPON		
Address **	<input type="checkbox"/>	14 MEADOWCROFT CLOSE		
		OTTENBURNE		
Post town		WINCHESTER		
County / Region		HANTS	UK Postcode	SO21 2HY
Country		UK	Nationality	BRITISH
Business occupation		DIRECTOR		

\* Voluntary details.

Name	* Style / Title			
		Day	Month	Year
Date of birth		/ / / / /		
Forename(s)				
Surname				
Address **	<input type="checkbox"/>			
Post town				
County / Region			UK Postcode	/ / / / /
Country			Nationality	
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)

ORDINARY	50	50 x £1.00
Totals	50	£50.00

**List of past and present shareholders**

(Use attached schedule where appropriate)

A full list is required if one was not included with either of the last two returns.

There were no changes in the period ☐

on paper in another format

A list of changes is enclosed ☐

A full list of shareholders is enclosed ☒

**Certificate**

I certify that the information given in this return is true to the best of my knowledge and belief.

Signed

*[Signature]*  
for and on behalf of  
ATM TRAVEL SERVICES LTD

Date

25.2.2008

† Please delete as appropriate.

† a director /secretary

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 includes  continuation sheets.

(enter number)

You do not have to give any contact information in the box opposite but if you do, it will help Companies House to contact you if there is a query on the form. The contact information that you give will be visible to searchers of the public record.

Tel

DX number  DX exchange

*Please list directors in alphabetical order.*

**Directors** In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.

Circumstance	Percentage (%)
If someone is attacking you	85
If someone is threatening you	75
If someone is harassing you	65
If someone is insulting you	55
If someone is annoying you	45

Date of birth

LL/LL/LLLL

Forename(s)

Surname

**Address** <sup>††</sup>

Post town

County / Region

UK Postcode

UK Postcode

Country

**Nationality** \_\_\_\_\_

### Nationality

### Business occupation

**Name**      \* **Style / Title**

---

Day      Month      Year

Date of birth

U L / L L / L L L L

Forename(s)

Surname

1. *Chlorophyll a* and *Chlorophyll b* were determined by the method of Arar and Collins (1971) using a Shimadzu 1010 spectrophotometer. The concentration of chlorophyll was expressed in  $\mu\text{g mL}^{-1}$  of the sample.

**Address** <sup>††</sup>

Post town

County / Region

UK Postcode

UK Postcode

Country

**Nationality** \_\_\_\_\_

### Nationality

### Business occupation

*Please list directors in alphabetical order.*

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<b>Name</b>	* Style / Title		<input type="text"/>		
	Day	Month	Year		
	Date of birth				
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Forename(s)				
	<input type="text"/>				
	Surname				
	<input type="text"/>				
<b>Address</b>	††				
<input type="checkbox"/>	<input type="text"/>				
	<input type="text"/>				
	Post town				
	<input type="text"/>				
	County / Region		UK Postcode		
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Country		Nationality		
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Business occupation</b>	<input type="text"/>				

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			Day	Month	Year
		<b>Date of birth</b>			
		<b>Forename(s)</b>			
		<b>Surname</b>			
	<b>Address</b> <b>††</b>				
	<b>Post town</b>				
	<b>County / Region</b>			<b>UK Postcode</b>	
	<b>Country</b>			<b>Nationality</b>	
	<b>Business occupation</b>				

Company Number \_\_\_\_\_

Company Name in full \_\_\_\_\_

\* Voluntary details. \_\_\_\_\_

**Company Secretary**

(Please photocopy this area to provide details of joint secretaries).

If a partnership give the names and addresses of the partners or the name of the partnership and office address.

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Name \* Style / Title \_\_\_\_\_

Forename(s) \_\_\_\_\_

Surname \_\_\_\_\_

Address †† \_\_\_\_\_

☐

Post town \_\_\_\_\_

County / Region \_\_\_\_\_

Country \_\_\_\_\_

Details of a new company secretary must be notified on form 288a.

UK Postcode \_\_\_\_\_

**Directors**

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Name \* Style / Title \_\_\_\_\_

Day Month Year

Date of birth \_\_\_\_\_

Forename(s) \_\_\_\_\_

Surname \_\_\_\_\_

Address †† \_\_\_\_\_

☐

Post town \_\_\_\_\_

County / Region \_\_\_\_\_

Country \_\_\_\_\_

Details of new directors must be notified on form 288a

UK Postcode \_\_\_\_\_

Nationality \_\_\_\_\_

Business occupation \_\_\_\_\_

## Directors

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Please list directors in alphabetical order.

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**Name** \* Style / Title \_\_\_\_\_

Day Month Year

Date of birth \_\_\_\_\_

Forename(s) \_\_\_\_\_

Surname \_\_\_\_\_

**Address** \*\* ☐ \_\_\_\_\_

Post town \_\_\_\_\_

County / Region \_\_\_\_\_ UK Postcode \_\_\_\_\_

Country \_\_\_\_\_ Nationality \_\_\_\_\_

**Business occupation** \_\_\_\_\_

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\* Voluntary details.

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**Name** \* Style / Title \_\_\_\_\_

Day Month Year

Date of birth \_\_\_\_\_

Forename(s) \_\_\_\_\_

Surname \_\_\_\_\_

**Address** \*\* ☐ \_\_\_\_\_

Post town \_\_\_\_\_

County / Region \_\_\_\_\_ UK Postcode \_\_\_\_\_

Country \_\_\_\_\_ Nationality \_\_\_\_\_

**Business occupation** \_\_\_\_\_

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# List of past and present shareholders Schedule to form 363a

CHFP000

Company Number 02595193

Company Name in full ALL THINGS MEDICAL 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 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

Shareholders' details	Class and number of shares or amount of stock held	Shares or amount of stock transferred (if appropriate)	
		Class and number of shares or amount of stock transferred	Date of registration of transfer
Name <u>KRZYSZTOF JUREK NICPON</u> Address <u>14 MEADOWCROFT CLOSE</u> <u>OTTENBOURNE</u> <u>WINCHESTER HANTS</u> UK Postcode <u>SO21 2HP</u>	ORDINARY 1		
Name <u>BARBARA TERESA NICPON</u> Address <u>14 MEADOWCROFT CLOSE</u> <u>OTTENBOURNE</u> <u>WINCHESTER HANTS</u> UK Postcode <u>SO21 2HP</u>	ORDINARY 1		
Name <u>OLIVER NICPON (IN TRUST)</u> Address <u>14 MEADOWCROFT CLOSE</u> <u>OTTENBOURNE</u> <u>WINCHESTER HANTS</u> UK Postcode <u>SO21 2HP</u>	ORDINARY 48		

## List of past and present shareholders (Continued)

Company Number \_\_\_\_\_

Shareholders' details	Class and number of shares or amount of stock held	Shares or amount of stock transferred <small>(if appropriate)</small>	Date of registration of transfer
Name ----- Address ----- ----- ----- ----- UK Postcode    _ _ _ _ _			
Name ----- Address ----- ----- ----- ----- UK Postcode    _ _ _ _ _			
Name ----- Address ----- ----- ----- ----- UK Postcode    _ _ _ _ _			
Name ----- Address ----- ----- ----- ----- UK Postcode    _ _ _ _ _			
Name ----- Address ----- ----- ----- ----- UK Postcode    _ _ _ _ _			