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Please complete in typescript, or in bold black capitals.

Resignation of director or secretary

	3 O 1	Name in full	11416	KMCL	ארק!	-	(UK) LII	
Resignation form	Date of resignation Resignation as director		Day 7	Month G as seci	Year QC			ppropriate box. If resignation d secretary mark both boxes.
Please insert details as previously notified to	NAME	*Style / Title	J		,		*Honours etc	
		Forename(s) Surname	CORPORATE ADMINISTRATION SECRETARIES LIMITED					
Companies House		[†] Date of Birth	Day	Month	Year			
If cessation is other than resignation, please state reason								
			A servi	ing direct	or, sec	retary	v etc must sign	the form below.
		Signed		B.I	alh		Dat	e 7.6.99

Please give the na

* Voluntary details. † Directors only.

Please give the name, address, telephone number and, if available, a DX number and Exchange of the person Companies House should contact if there is any query.



Form revised March 1995

THE COMPANY STORE LIMITED

HARRINGTON CHAMBERS, 26 NORTH JOHN STREET

(by a serving director / secretary / administrator / administrative receiver / receiver manager / receiver

LIVERPOOL L2 9RUel (0151) 258 1258

DX number 14114 DX exchange LIVERPOOL

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 or

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB

for companies registered in Scotland DX 235 Edinburgh