



Confirmation Statement

Company Name: **ALEXIS CARE LIMITED**

Company Number: **05904432**



X5JT5APK

Received for filing in Electronic Format on the: **15/11/2016**

Company Name: **ALEXIS CARE LIMITED**

Company Number: **05904432**

Confirmation **15/11/2016**

Statement date:

Persons with Significant Control (PSC)

PSC notifications

Notification Details

Date that person became registrable: **01/10/2016**

Name: **MRS EVELYN CARDER**

Service address recorded as Company's registered office

Country/State Usually Resident: **ENGLAND**

Date of Birth: ****/04/1978**

Nationality: **BRITISH**

Nature of control

The person has the right to exercise, or actually exercises, significant influence or control over the company.

Ceased as PSC

Date ceased: **01/10/2016**
Name: **MR SHRIEN DEWANI**
Date of Birth: ****/12/1979**

Confirmation Statement

I confirm that all information required to be delivered by the company to the registrar in relation to the confirmation period concerned either has been delivered or is being delivered at the same time as the confirmation statement

Authorisation

Authenticated

This form was authorised by one of the following:

Director, Secretary, Person Authorised, Charity Commission Receiver and Manager, CIC Manager,
Judicial Factor