



Companies House

AR01 (ef)

Annual Return



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Company Name: **RETHINK ORTHOPEDICS LTD**

Company Number: **07691477**

Date of this return: **04/07/2014**

SIC codes: **32500**

Company Type: **Private company limited by shares**

Situation of Registered Office: **C/O PHILIP WATERMAN
7 BARLEY WAY
WEYMOUTH
DORSET
ENGLAND
DT4 8SW**

Officers of the company

Company Director 1

Type: **Person**
Full forename(s): **DR. JAVIER**

Surname: **PEREIRO DE LAMO**

Former names:

Service Address recorded as Company's registered office

Country/State Usually Resident: **SPAIN**

Date of Birth: **08/04/1965** Nationality: **SPANISH**

Occupation: **MEDICAL DOCTOR**

Company Director 2

Type: **Person**
Full forename(s): **MR PHILIP JOHN**

Surname: **WATERMAN**

Former names:

Service Address recorded as Company's registered office

Country/State Usually Resident: **SPAIN**

Date of Birth: **26/11/1959** Nationality: **BRITISH**

Occupation: **CHIEF COMMERCIAL OFFICER**

Statement of Capital (Share Capital)

Class of shares	ORDINARY	<i>Number allotted</i>	1000
		<i>Aggregate nominal value</i>	1000
<i>Currency</i>	EUR	<i>Amount paid per share</i>	0
		<i>Amount unpaid per share</i>	1

Prescribed particulars

ORDINARY SHARES HAVE FULL RIGHTS IN THE COMPANY WITH RESPECT TO VOTING, DIVIDENDS AND DISTRIBUTIONS.

Statement of Capital (Totals)

<i>Currency</i>	EUR	<i>Total number of shares</i>	1000
		<i>Total aggregate nominal value</i>	1000

Full Details of Shareholders

The details below relate to individuals / corporate bodies that were shareholders as at 04/07/2014 or that had ceased to be shareholders since the made up date of the previous Annual Return

A full list of shareholders for the company are shown below

Shareholding 1 : **100 ORDINARY shares held as at the date of this return**
Name: **PHILIP WATERMAN**

Shareholding 2 : **450 ORDINARY shares held as at the date of this return**
Name: **JAVIER PEREIRO DE LAMO**

Shareholding 3 : **450 ORDINARY shares held as at the date of this return**
Name: **JUAN CARLOS RODRIGUEZ OLAVERRI**

Authorisation

Authenticated

This form was authorised by one of the following:

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