

600

Notice of appointment of liquidator in a  
members' or creditors' voluntary winding up



Companies House

FRIDAY



A20 08/11/2019 #169  
COMPANIES HOUSE

to

**1** Company details

Company number 09300650

Company name in full Abdal Chaudhry Limited

→ Filing in this form  
Please complete in typescript or in  
bold black capitals.

**2** Liquidator's name

Full forename(s) James Stephen

Surname Pretty

**3** Liquidator's address

Building name/number Beacon, 99

Street Leigh Road

Post town Eastleigh

County/Region Hampshire

Postcode SO50 9DR

Country

**4** Liquidator's email address or telephone number <sup>①</sup>

Email address

Telephone number 02380 651441


① You must give an email address or  
telephone number. All information  
on this form will appear on the  
public record.

**5** Insolvency practitioner number

Number 9065

600

# Notice of appointment of liquidator in a members' or creditors' voluntary winding up

<b>6 Liquidator's name <sup>①</sup></b>		<b>① Other Liquidator's details</b> Use this section to tell us about another liquidator.
Full forename(s)		
Surname		
<b>7 Liquidator's address <sup>②</sup></b>		<b>② Other Liquidator's details</b> Use this section to tell us about another liquidator. Use the continuation page to tell us about more than two liquidators.
Building name/number		
Street		
Post town		
County/Region		
Postcode		
Country		
<b>8 Liquidator's email address or telephone number <sup>③</sup></b>		<b>③ You must give an email address or telephone number. All information on this form will appear on the public record.</b>
Email address		
Telephone number		
<b>9 Insolvency practitioner number</b>		
Number		
<b>10 Statement of appointment</b>		
I confirm the appointment of the liquidator(s) on		
Date	d 2 8 m 1 0 y 2 0 1 9	
<b>11 Appointment details</b>		
The appointment was made by (Tick one)		
<input checked="" type="checkbox"/> Company		
<input type="checkbox"/> Creditors		
<b>12 Type of liquidation</b>		
Tick to confirm the liquidation type		
<input checked="" type="checkbox"/> Members		
<input type="checkbox"/> Creditors		
<b>13 Sign and date</b>		
Liquidator's signature	Signature X  X	
Signature date	d 2 8 m 1 0 y 2 0 1 9	

600

# Notice of appointment of liquidator in a members' or creditors' voluntary winding up

## **Presenter information**

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

Contact name **James Pretty**

Company name **Beacon**

Address **99 Leigh Road**

Post town **Eastleigh**

County/region **Hampshire**

Postcode **S O 5 0 9 D R**

Country

DX

Telephone **02380 651441**

## **Checklist**

We may return forms completed incorrectly or with information missing.

Please make sure you have remembered the following:

- ☐ The company name and number match the information held on the public Register.
- ☐ You have signed and dated the form.

## **Important information**

All information on this form will appear on the public record.

## **Where to send**

You may return this form to any Companies House address, however for expediency we advise you to return it to the address below:

The Registrar of Companies, Companies House,  
Crown Way, Cardiff, Wales, CF14 3UZ.  
DX 33050 Cardiff.

## **Further information**

For further information please see the guidance notes on the website at [www.gov.uk/companieshouse](http://www.gov.uk/companieshouse) or email [enquiries@companieshouse.gov.uk](mailto:enquiries@companieshouse.gov.uk)

This form is available in an alternative format. Please visit the forms page on the website at [www.gov.uk/companieshouse](http://www.gov.uk/companieshouse)

## 600 - continuation page

Notice of appointment of liquidator in a members' or creditors'  
voluntary winding up

<b>1</b>	<b>Company details</b>	
Company number	<input type="text"/>	
Company name in full	<input type="text"/>	
<b>2</b>	<b>Liquidator's name</b>	
Full forename(s)	<input type="text"/>	
Surname	<input type="text"/>	
<b>3</b>	<b>Liquidator's address</b>	
Building name/number	<input type="text"/>	
Street	<input type="text"/>	
	<input type="text"/>	
Post town	<input type="text"/>	
County/Region	<input type="text"/>	
Postcode	<input type="text"/>	
Country	<input type="text"/>	
<b>4</b>	<b>Liquidator's email address or telephone number</b>	
Email address	<input type="text"/>	<b>①</b> You must give an email address or telephone number. All information on this form will appear on the public record.
Telephone number	<input type="text"/>	
<b>5</b>	<b>Insolvency practitioner number</b>	
Insolvency practitioner number	<input type="text"/>	