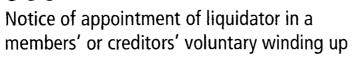
In accordance with section 109 of the Insolvency Act 1986 600





\*AASIFØNK\* A15 29/05/2021

29/05/2021 #147 COMPANIES HOUSE

Company details		
1 1 7 9 8 2 9 0	→ Filling in this form Please complete in typescript or in	
Basra Meditech Limited	bold black capitals.	
·		
Liquidator's name	and the second of the second o	
Clive		
Morris	[	
Liquidator's address	`	
Heskin Hall Farm		
Wood Lane		
Heskin		
Preston		
PR7 5 PA		
Liquidator's email address or telephone number •	• You must give an email address or	
	telephone number. All information on this form will appear on the	
01257 452021	public record.	
Insolvency practitioner number		
8 8 2 0		
	¥*	
	Basra Meditech Limited  Liquidator's name  Clive  Morris  Liquidator's address  Heskin Hall Farm  Wood Lane  Heskin  Preston  P R 7 5 P A  Liquidator's email address or telephone number  01257 452021  Insolvency practitioner number  8 8 2 0	

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

6 🖟	Liquidator's name <sup>®</sup>		
ull forename(s)		Other Liquidator's details	
urname		Use this section to tell us about another liquidator.	
7볼	Liquidator's address @	the second of th	
Building name/number		Other Liquidator's details	
Street		Use this section to tell us about another liquidator. Use the continuation page to tell us about more than two liquidators.	
Post town	·		
County/Region			
Postcode			
Country			
83	Liquidator's email address or telephone number ®	You must give an email address or	
mail address		telephone number. All information on this form will appear on the	
elephone number		public record.	
9製	Insolvency practitioner number	<u>, , , , , , , , , , , , , , , , , , , </u>	
lumber			
10.	Statement of appointment		
	I confirm the appointment of the liquidator(s) on		
Date	2 6 0 5 2 0 2 1		
111	Appointment details	<u> </u>	
	The appointment was made by (Tick one)  ☑ Company ☐ Creditors		
12	Type of liquidation	The state of the s	
	Tick to confirm the liquidation type  ☐ Members ☐ Creditors		
18	Sign and date		
iquidator's signature	X X		
	d d d m m 7		

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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	Heather Dolan
Company name	Marshall Peters
Address	Heskin Hall Farm
	Wood Lane
Post town	Heskin
County/Region	Preston
Postcode	PR75PA
Country	
DX	
Telephone	01257 452021
Choc	klict

# 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 or email 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