

101676/30 LLP363

Annual Return of a Limited Liability Partnership

Please complete in typescript
or in bold black capitals.
*

CHMBOOO		
CHWP000	LLP Number	OC 312589
Full Name of Limite Liability Partnershi		YIRAF I KOMPANIA LLP
L 1	ability Faithership	
	Date of this return e information in this return is made up to	Day Month Year 0,60,42,009
If you retui the a	Date of next return wish to make your next rn on a date earlier than nniversary of this return ase show the date here.	Day Month Year
	Registered Office Show here the address	INTERSHORE SLUTTES
registered office must be notified on Form LLP287.	as at the date of this return.	VERNON HOUSE, SICILIAN AVENUE
	Post town	LONDON
	County	UK Postcode WC1A 2QS
	Register of	<u> </u>
Debenture Holders		
If there is a register debenture holders, or		
dependire noiders, or a duplicate of any such register or part of it,	ch Post town it,	
which is not kept at t registered office, sta here where it is kept		UK Postcode
nord wildre with items.	List members o	n page 2
	Certificate	As a designated member I certify that the information given in this return is true to the best of my knowledge and belief.
	Signed	Designated Member Date 01/06/2009
When you have signed the return send it with the fee to the Registrar of Companies. Cheques should be made payable to Companies House.		This return includes continuation sheets.
		When you have completed and signed the form please send it to the

LD3 12/06/2009 151

COMPANIES HOUSE

Registrar of Companies at: DX 33050 Cardiff

Companies House, Crown Way, Cardiff, CF14 3UZ for partnerships registered in England and Wales

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

DX 235 Edinburgh or LP - 4 Edinburgh 2 for partnerships registered in Scotland

Members Please list members	s in alphabetical order	
In the case of a member that is a corporation or a		Details of new members must be notified on form LLP288a
Scottish firm, the name is the	Surname or Corporate Name	AXXESS INTERNATIONAN
corporate or firm name.	Forename(s)	AMITED.
** Tick this box if the address shown	Address **	306 VICTORIA HOUSE
is a service address for the beneficiary		
of a Confidentiality Order granted under section 723B of the	Post town	VICTORIA
Companies Act 1985 otherwise, give	County / Region	MAHE UK Postcode
your usual residen- tial address. In the case of a corpora-	Country	SEYCHELLES Tick box if designated member
tion or Scottish firm, give the regis- tered or principal		
office address.		
	Member Reference	Day Month Year
	Number *(as advised by Companies House)	. 34341 Date of Birth
* Voluntary information		
Members		
	in alphabetical order	
In the case of a member that is a		Details of new members must be notified on form LLP288a
corporation or a Scottish firm, the name is the	Surname or Corporate Name	BREWSTER
corporate or firm name.	Forename(s)	ALPRED VICTOR
^{††} Tick this box if	Address **	BATE LAZARE
the address shown is a service address for the beneficiary		
of a Confidentiality Order granted under	Post town	
section 723B of the Companies Act 1985 otherwise, give your	County / Region	MAHE UK Postcode
usual residential address. In the	Country	SZYCHELLES Tick box if designated member
case of a corpora- tion or Scottish firm, give the registered	'	
or principal office address.		
	Member Reference	Day Month Year
	Number *(as advised by Companies House)	48835 Date of Birth 02041953
* Voluntary	,	

information