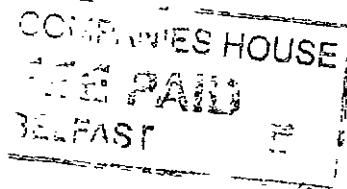


Waterfront Plaza
8 Laganbank Road
BELFAST
BT1 3BS

Tel 0303 1234 5000

Web www.companieshouse.gov.uk



371s

ANNUAL RETURN

Company Number **NI059630**
Company Name **ICONIC DEVELOPMENTS LIMITED**
Company Type **0 - NI PR LTD SH**
Date **04/03/2010**

A full list of members is enclosed



DATE OF THIS RETURN

The information in this return should be made up to a date not later than

07/06/2009

DAY MONTH YEAR

07	06	09
----	----	----

DATE OF NEXT RETURN

If you wish to make up your next return to a date earlier than the anniversary of this return please show the date here. Companies Registry will then send a form at the appropriate time

DAY MONTH YEAR

--	--	--

REGISTERED OFFICE

This is the address registered by Companies Registry
If you wish to change this address please file **form 295**

**6 KINNAIRD STREET
BELFAST
BT14 6GE**

TUESDAY



JYX3VIJD

JNI 23/03/2010 174
COMPANIES HOUSE

JNI 09/03/2010 224
COMPANIES HOUSE

5001-GENERAL BUILDERS

LOCATION OF REGISTER OF MEMBERS
This address must be in Northern Ireland

LOCATION OF REGISTER OF DEBENTURE HOLDERS

This address must be in Northern Ireland

Appointments / Resignations and Change in Particulars
must be notified on form 296

Please go to the forms section of our website if you require a continuation page www.companiesregistry-ni.gov.uk

Company Secretary

Forename KEE
Surname DOHERTY
Address 16 STRAUSSON GARDENS
NEWTOWNARDS
Post Town _____
County / Region Down
Post Code BT 23 82N
Country ~~IRELAND~~ N. IRELAND

Appointments / Resignations and Change in Particulars
must be notified on form 296

Current Directors

Forename MICHAEL
Surname DOHERTY
Address 45 WARRICK LEBURN ROAD
Post Town BELFAST
County / Region _____
Post Code BT 10 0LX
Country _____
Date of Birth 25/04/1964
Nationality IRISH
Occupation DIRECTOR
Other Directorships Yes/No _____

Forename CIARAN
Surname MARCHEL
Address 107 SCOTCH STREET
DOWNPATRICK
Post Town _____
County / Region Co Down
Post Code BT 30 6AU
Country _____
Date of Birth 06/06/1955
Nationality IRISH
Occupation DIRECTOR
Other Directorships Yes/No _____

Current Directors

Forename AARON
 Surname WILLIAMS
 Address 5 HOLYBROOK
SOLDIERSTOWN RD
 Post Town AGHALEE
 County / Region _____
 Post Code BT 67 0GZ
 Country _____
 Date of Birth 28 / 06 / 1968
 Nationality BRITISH
 Occupation DIRECTOR
 Other Directorships Yes/No _____

Forename LEE
 Surname DUFFY
 Address 16 STANFORD GATE
 Post Town NEWTONARDS
 County / Region CO DOWRY
 Post Code BT 23 8ZN
 Country _____
 Date of Birth 31 / 03 / 1963
 Nationality BRITISH
 Occupation DIRECTOR
 Other Directorships Yes/No _____

Forename _____
 Surname _____
 Address _____
 Post Town _____
 County / Region _____
 Post Code _____
 Country _____
 Date of Birth / /
 Nationality _____
 Occupation _____
 Other Directorships Yes/No _____

SHARE CAPITAL (See Note 8)

Enter details of all shares in issue at the date of this return

Nominal Capital 100,000.00
Paid Up Capital 100 00

CLASS NUMBER AGGREGATE
VALUE

(The above details are those currently held on our records)

TOTALS

LIST OF PAST AND PRESENT MEMBERS

(Use attached schedule and additional sheets where appropriate) A full list is required if one was not included with either of the last two returns

ELECTIVE RESOLUTIONS

(Private companies only)

If an elective resolution is in force at the date of this return to dispense with annual general meetings, mark the box

☐

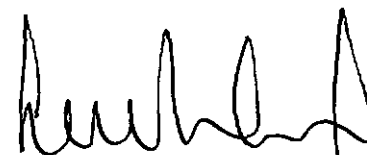
If an elective resolution is in force at the date of this return to dispense with laying accounts in general meetings, mark the box

☐

CERTIFICATE

I certify that the information given in this return is true to the best of my knowledge and belief

SIGNED



to ~~Secretary~~

~~Secretary/Director~~
(delete as appropriate)

DATE

8/3/2010

Cheques should be made payable to the Companies House

This return includes
Continuation sheets

To whom should Companies Registry direct any enquiries about the information shown in this return?

Tel _____ Ext _____

SCHEDULE TO FORM 371s

COMPANY NUMBER NI059630

COMPANY NAME ICONIC DEVELOPMENTS LIMITED

LIST OF PAST AND PRESENT MEMBERS

<u>PLEASE NOTE</u>	Account of Shares			
For Returns dated on or after 1 st October 2008 shareholders addresses cannot be accepted Only shareholders full names should be provided	<i>Number of shares or amount of stock held by existing members at date of this return</i>	<i>Particulars of shares transferred since date of last return. or, in the case of the first return, since the incorporation of the company, by (a) persons who are still members (b) persons who have ceased to be members</i>		
		Number	Date of registration of transfer	
SHAREHOLDERS FULL NAME ONLY				

SCHEDULE TO FORM 371s

LIST OF PAST AND PRESENT MEMBERS

[illegible]