



Companies House

AR01 (ef)

Annual Return



Received for filing in Electronic Format on the: 09/03/2016

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Company Name: **LEHOVSKY SERVICES MEDICAL LIMITED**

Company Number: **08412220**

Date of this return: **20/02/2016**

SIC codes: **86220**

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

Situation of Registered Office: **2 PARK AVENUE
RADLETT
HERTFORDSHIRE
WD7 7EA**

Officers of the company

Company Director 1

Type: **Person**
Full forename(s): **MRS ALISON JANE**

Surname: **LEHOVSKY**

Former names:

Service Address recorded as Company's registered office

Country/State Usually Resident: **ENGLAND**

Date of Birth: ****/06/1961** Nationality: **BRITISH**

Occupation: **DIRECTOR**

Company Director 2

Type: **Person**
Full forename(s): **DR JAN**

Surname: **LEHOVSKY**

Former names:

Service Address recorded as Company's registered office

Country/State Usually Resident: **ENGLAND**

Date of Birth: ****/11/1960** Nationality: **CZECH**

Occupation: **DOCTOR**

Company Director 3

Type: **Person**
Full forename(s): **MISS KATHERINE ANNA**

Surname: **LEHOVSKY**

Former names:

Service Address recorded as Company's registered office

Country/State Usually Resident: **ENGLAND**

Date of Birth: ****/12/1993** *Nationality:* **BRITISH**

Occupation: **DIRECTOR**

Statement of Capital (Share Capital)

Class of shares	ORDINARY	<i>Number allotted</i>	100
		<i>Aggregate nominal value</i>	100
<i>Currency</i>	GBP	<i>Amount paid per share</i>	1
		<i>Amount unpaid per share</i>	0

Prescribed particulars

EACH SHARE HAS FULL RIGHTS IN THE COMPANY WITH RESPECT TO VOTING, DIVIDENDS AND DISTRIBUTIONS.

Statement of Capital (Totals)

<i>Currency</i>	GBP	<i>Total number of shares</i>	100
		<i>Total aggregate nominal value</i>	100

Full Details of Shareholders

The details below relate to individuals / corporate bodies that were shareholders as at 20/02/2016 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: LEHOVSKY MEDICAL PRACTICE LTD

Authorisation

Authenticated

This form was authorised by one of the following:

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