



Companies House
— for the record —

AR01 (ef)

Annual Return



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Received for filing in Electronic Format on the: **05/10/2012**

Company Name: **PEPPERMINT IT LIMITED**

Company Number: **05952494**

Date of this return: **02/10/2012**

SIC codes: **62012**
62020

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

Situation of Registered Office: **6 HAZEL DRIVE**
ILLINGWORTH
HALIFAX
WEST YORKSHIRE
HX2 9NB

Officers of the company

Company Secretary 1

Type: **Person**
Full forename(s): **CAROLINE LUCY**

Surname: **JANES**

Former names:

Service Address: **6 HAZEL DRIVE
ILLINGWORTH
HALIFAX
WEST YORKSHIRE
HX2 9NB**

Company Director ***1***

Type: **Person**

Full forename(s): **AARON PETER**

Surname: **JANES**

Former names:

Service Address: **6 HAZEL DRIVE
ILLINGWORTH
HALIFAX
WEST YORKSHIRE
HX2 9NB**

Country/State Usually Resident: **ENGLAND**

Date of Birth: **31/03/1978** *Nationality:* **CANADIAN**

Occupation: **IT CONSULTANT**

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

EQUAL RIGHT FOR VOTING, DIVIDEND AND DISTRIBUTION ON WINDING UP

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 02/10/2012 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 : **50 ORDINARY shares held as at the date of this return**
Name: **AARON JANES**

Shareholding 2 : **50 ORDINARY shares held as at the date of this return**
Name: **CAROLINE JANES**

Authorisation

Authenticated

This form was authorised by one of the following:

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