



*Companies House*  
— for the record —

**AR01** (ef)

**Annual Return**



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*Company Name:* **OPTIMUM SERVICES LTD**

*Company Number:* **05098467**

*Date of this return:* **08/04/2010**

*SIC codes:* **7487**

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

*Situation of Registered Office:* **UNIT 6 STAPYLTON COURT  
GRANGETOWN  
MIDDLESBROUGH  
TS6 7BL**

**Officers of the company**

*Company Secretary* **I**

*Type:* **Person**

*Full forename(s):* **IRENE**

*Surname:* **LAW**

*Former names:*

*Service Address:* **3 SANDSEND ROAD  
REDCAR  
TS10 5DF**

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*Company Director* **1**

*Type:* **Person**

*Full forename(s):* **MR NEIL ANDREW**

*Surname:* **ROBINSON**

*Former names:*

*Service Address:* **12 CROESMERE DRIVE  
GREAT SUTTON  
ELLESMERE PORT  
CHESHIRE  
CH66 2WQ**

*Country/State Usually Resident:* **UNITED KINGDOM**

*Date of Birth:* **04/09/1961**

*Nationality:* **BRITISH**

*Occupation:* **DIRECTOR**

## Statement of Capital (Share Capital)

<b>Class of shares</b>	<b>ORDINARY</b>	<i>Number allotted</i>	<b>1</b>
		<i>Aggregate nominal value</i>	<b>1</b>
<i>Currency</i>	<b>GBP</b>	<i>Amount paid per share</i>	<b>1</b>
		<i>Amount unpaid per share</i>	<b>0</b>
<i>Prescribed particulars</i>	<b>ALL SHARES ARE NON-REDEEMABLE AND RANK EQUALLY IN TERMS OF :- (A)VOTING RIGHTS - ONE VOTE FOR EACH SHARE. (B)RIGHTS TO PARTICIPATE IN ALL APPROVED DIVIDEND DISTRIBUTIONS FOR THAT CLASS OF SHARE. (C)RIGHTS TO PARTICIPATE IN ANY CAPITAL DISTRIBUTION ON WINDING UP.</b>		

## Statement of Capital (Totals)

<i>Currency</i>	<b>GBP</b>	<i>Total number of shares</i>	<b>1</b>
		<i>Total aggregate nominal value</i>	<b>1</b>

### *Full Details of Shareholders*

The details below relate to individuals / corporate bodies that were shareholders as at 08/04/2010 or that had ceased to be shareholders since the made up date of the previous Annual Return

*A full list of shareholders for a private or non-traded public company are shown below*

*Shareholding* : 1

**1 ORDINARY Shares held as at 08/04/2010**

*Name:* **NEIL ANDREW ROBINSON**

*Address:*

## *Authorisation*

*Authenticated*

*This form was authorised by one of the following:*

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