

363a

Please complete in typescript,
or in bold black capitals.

Annual Return

ASDCIS
110053

CHFP016

Company Number 2616728

Company Name in full P.S. SONGS LIMITED

Date of this return

The information in this return is made up to

Day Month Year
0 4 / 0 6 / 2 0 0 1

Date of next return

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

Day Month Year
/ /

Registered Office

Show here the address at the date of
this return.

208 KENTON ROAD

Any change of
registered office
must be notified
on form 287.

Post town HARROW

County / Region MIDDLESEX

UK Postcode H A 3 8 B X

Principal business activities

Show trade classification code number(s)
for the principal activity or activities.

9231

If the code number cannot be determined,
give a brief description of principal activity.



When you have completed and signed the form please send it to the
Registrar of Companies at:
Companies House, Crown Way, Cardiff, CF14 3UZ DX 33050 Cardiff
for companies registered in England and Wales or
Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB
for companies registered in Scotland DX 235 Edinburgh

Register of members

If the register of members is not kept at the registered office, state here where it is kept.

Post town

County / Region

UK Postcode

Register of Debenture holders

If there is a register of debenture holders and it is not kept at the registered office, state here where it is kept.

Post town

County / Region

UK Postcode

Company type

Public limited company

Private company limited by shares

Private company limited by guarantee without share capital

Private company limited by shares exempt under section 30

Private company limited by guarantee exempt under section 30

Private unlimited company with share capital

Private unlimited company without share capital

<input type="checkbox"/>
<input checked="" type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

Please mark the appropriate box

Company Secretary

(Please photocopy this area to provide details of joint secretaries).

Name *Style / Title

Forename(s) KELLY MARIE

Surname PATMORE

* Voluntary details.

Previous forename(s)

Previous surname(s)

Address

LEWGARS

NIGHTINGALES LANE

Usual residential address

must be given. In the case of a corporation or a Scottish firm, give the registered or principal office address.

Post town CHALFONT ST GILES

County / Region BUCKINGHAMSHIRE

UK Postcode H P 8 4 S H

Country ENGLAND

Details of a new company secretary must be notified on form 288a.

Directors

Please list directors in alphabetical order.

Details of new directors must be notified on form 288a

Name	*Style / Title										
		Day	Month	Year							
Directors In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.	Date of birth	0	7	0	8	1	9	4	6		
	Forename(s)	ROBERT CLIVE									
	Surname	PATMORE									
Address		LEWGARS									
		NIGHTINGALES LANE									
	Post town	CHALFONT ST GILES									
Usual residential address must be given. In the case of a corporation, give the registered or principal office address.	County / Region	BUCKINGHAMSHIRE			UK Postcode	H	P	8	4	S	H
	Country	ENGLAND			Nationality	BRITISH					
	Business occupation	DIRECTOR									

* Voluntary details.

Name	*Style / Title										
		Day	Month	Year							
Directors In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.	Date of birth	2	3	1	0	1	9	7	8		
	Forename(s)	KELLY MARIE									
	Surname	PATMORE									
Address		LEWGARS									
		NIGHTINGALES LANE									
	Post town	CHALFONT ST GILES									
Usual residential address must be given. In the case of a corporation, give the registered or principal office address.	County / Region	BUCKINGHAMSHIRE			UK Postcode	H	P	8	4	S	H
	Country	ENGLAND			Nationality	BRITISH					
	Business occupation	I T CONSULTANT									

Issued share capital

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

Class (e.g. Ordinary/Preference)	Number of shares issued	Aggregate Nominal Value (i.e. Number of shares issued multiplied by nominal value per share)
ORDINARY	100	£100
Totals	100	£100

List of past and present shareholders

(Use attached schedule where appropriate)

A full list is required if one was not included with either of the last two returns.

There were no changes in the period

☐

on paper

in another format

A list of changes is enclosed

☐☐

A full list of shareholders is enclosed

☒☐

Certificate

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

Signed

R. c. Patm

Date

26 JUNE 2000

† Please delete as appropriate.

† a director / secretary

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

(enter number)

continuation sheets.

Please give the name, address, telephone number and, if available, a DX number and Exchange of the person Companies House should contact if there is any query.

NORMAN STANLEY

208 KENTON ROAD

HARROW

MIDDLESEX HA3 8BX

Tel 0181 907 0283

DX number

DX exchange

List of past and present shareholders Schedule to form 363a

CHFP016

Company Number 2616728

Company Name in full P.S. SONGS LIMITED

- Changes to shareholders particulars or details of the amount of stock or shares transferred must be completed each year
- You must provide a "full list" of all the company shareholders on:
 - The company's first annual return following incorporation;
 - Every third annual return after a full list has been provided
- List the company shareholders in alphabetical order or provide an index
- List joint shareholders consecutively

Shareholders' details	Class and number of shares or amount of stock held	Shares or amount of stock transferred <i>(if appropriate)</i>	
		Class and number of shares or amount of stock transferred	Date of registration of transfer
Name ROBERT CLIVE PATMORE <hr/> Address LEWGARS, NIGHTINGALES LANE <hr/> CHALFONT ST GILES <hr/> BUCKINGHAMSHIRE <hr/> UK Postcode H P 8 4 S H _ _ _ _ _ _ _ _ _	50		
Name CHARLES JOHN SKARBEK <hr/> Address ANDREDSBOURNE <hr/> COGGINS MILL LANE <hr/> MAYFIELD, EAST SUSSEX <hr/> UK Postcode T N 2 0 6 U N _ _ _ _ _ _ _ _ _	50		
Name _____ <hr/> Address _____ <hr/> _____ <hr/> _____ <hr/> UK Postcode _____ _ _ _ _ _ _ _ _ _			