

288b

Please complete in typescript, or in bold black capitals.

Resignation of director or secretary

Company Number			3097	162									
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Resignation form	Date of resignation		Day	Month 08	Year / 95								
	Resigna	X	as secr	etary	Please i is as a c	se mark the appropriate box. If resignation a director and secretary mark both boxes.					1		
	NAME	NAME *Style / Title				*Hono	ours etc						
Please insert details as previously notified to Companies Hous		Forename(s)											
) .	Surname	COMPANY DIRECTORS LIMITED										
lf cessa resigna	Day	Month	Year	.,,									
* Voluntary details.		Signed		-	$ \leftarrow $	ary etc mu	st sign th	e form	belo	ow. 08	1	95	
† Directors only.		~	(by a servir	ng director / s	secretary / ac	lministrator / ad	ministrative r	eceiver/	receive	er mana	ager/	receiver	
Please give the name, address, telephone number and, if available,			A1 Company Services Limited				(Our F	(Our Ref: TO/19503)					
a DX number a the person Compa contact if there is a		788-79	90 Finchle		London	NW11							
Cornact ii tijere is t	any qu o ry.	_	DX nun	nber		ГеI ————————————————————————————————————		458 9	637 ——				

Registrar of Companies at:

When you have completed and signed the form please send it to the

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB

DX 33050 Cardiff

DX 235 Edinburgh

Companies House, Crown Way, Cardiff, CF4 3UZ

for companies registered in England and Wales

for companies registered in Scotland

Form revised March 1995

KLO *KMF7VEST* 703 COMPANIES HOUSE 14/09/95