

Bair 100223 215 363a

Please complete in typescript, or in bold black capitals.

## **Annual Return**

| Company I | ١ | lum | ber |
|-----------|---|-----|-----|
|-----------|---|-----|-----|

2914018

Company Name in full

ARENA FLOORING (MIDNANOS) **LIMITED** 



Date of this return (See note 1) The information in this return is made up to

Year Day Month 03 29 97

Date of next return (See note 2) 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.

Year Day Month

133 RANK STREET

Registered Office (See note 3) Show here the address at the date of this return.

Any change of registered office must be notified

Post town

BRIERLEY HILL

DY5 3DE

County / Region

NEST MIDLANDS

Postcode

## **Principal business activities**

(See note 4)

on form 287.

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

5018

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



Form revised March 1995

When you have completed and signed the form please send it to the Registrar of Companies at:

Companies House, Crown Way, Cardiff, CF4 3UZ DX 33050 Cardiff for companies registered in England and Wales

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB for companies registered in Scotland

DX 235 Edinburgh

| Danistan of more                              | - l   | 1                |                                       |         |          |              |             |           | ***        |
|---|---|------------------|---------------------------------------|---------|----------|--------------|-------------|-----------|------------|
| •   | gister of members (See note 5)  USO HIGH STREET |                  |                                       |         |          |              |             |           |            |
| registered office, sta                        |   |                  |                                       |         |          |              |             |           |            |
|   |   |                  | _                                     |         |          |              |             |           |            |
|   |   | Post town        | CRAC                                  | KEY .   | HEAT     | <del>'</del> |             |           |            |
|   | C   | ounty / Region   | VEST                                  | ' MIDL  | RONA     |              | Postcode    | B6+       | SHN        |
|   |   | •                | · · · · · · · · · · · · · · · · · · · |         |          |              |             |           |            |
|   |   |                  |                                       | :       |          |              |             |           |            |
| Register of Deb                               | enture h  | olders           |                                       |         |          |              |             |           |            |
| (See note 6) If there is a registe            | r of debe                                       | nture holders    |                                       | `       | ٠.       |              |             |           |            |
| and it is not kept a state here where it is   |   | istered office,  |                                       | •       |          |              |             |           |            |
|   | •   | Post town        |                                       | •       |          |              |             |           |            |
|   | 0   | avente / Damian  |                                       |         |          | 1            | Destanda    |           |            |
|   | C   | ounty / Region   |                                       |         |          |              | Postcode    |           |            |
|   |   |                  |                                       |         |          |              |             |           |            |
| Company type                                  | (See note 7)                                    | )                |                                       |         |          |              |             |           |            |
| Public limited company                        |   |                  |                                       |         |          |              |             |           |            |
| Private company limite                        | d by share:                                     | s                |                                       |         |          |              |             |           |            |
| Private company limite                        | d by guara                                      | ntee without     |                                       |         |          |              |             |           |            |
| share capital                                 |   |                  |                                       | \       | Please r | nark the     | appropriate | box       |            |
| Private company limite section 30             | d by snare:                                     | s exempt under   | · · · · · · · · · · · · · · · · · · · |         |          |              | app.op.iato |           |            |
| Private company limite under section 30       | d by guara                                      | ntee exempt      |                                       |         |          |              |             |           |            |
| Private unlimited comp                        | any with sh                                     | nare capital     |                                       | :       | ÷        |              |             |           |            |
| Private unlimited comp                        | any withou                                      | it share capital |                                       |         | -        |              |             |           |            |
|   |   |                  |                                       | _}      |          |              |             |           |            |
| Company Secre                                 | tary (see                                       | notes 1-5)       | Details of a                          | new com | pany se  | cretary      | must be no  | tified on | form 288a. |
| (Please photocopy this area to provide        | Name  | * Style / Title  | HRS                                   |         | $\neg$   | *1-          | lonours etc |           |            |
| details of joint secretaries).                |   |                  |                                       |         |          |              |             |           |            |
|   |   | Forename(s)      | JACQUI                                | ELINE   |          |              |             |           | ·          |
|   |   | Surname          | TYLER                                 |         |          |              |             |           |            |
| * Voluntary details.                          | Previou   | ıs forename(s)   |                                       |         |          |              |             |           |            |
|   | Previo  | us surname(s)    |                                       |         |          |              |             |           |            |
| Address                                       |   | 33 As            | HLEY                                  | Cros    | E.       |              |             |           |            |
|   |   |                  | 03 10                                 | ,.,,,,  |          |              |             | ·         |            |
| Usual residential                             |   |                  |                                       |         | <u> </u> |              |             |           |            |
| address must be given. In the case of a       |   | Post town        | Kingsvi                               | NFOR(   | <u> </u> |              | `           |           |            |
| corporation, give the registered or principal |   | ounty / Region   | WEST H                                | IDHAN   | ದಿತ      |              | Postcode    | DAE       | 95×        |
| office address.                               |   | Country          | FNOLAN                                | ^       |          |              |             |           |            |

| Directors (conti  | inued)               | Details of new directors must be notified on for | rm 288a          |  |      |
|---|----------------------|--|------------------|--|------|
|   | Name * Style / Title | * Style / Title                                  |                  | Month                                  | Year |
|   | * Honours etc        | Date of birth                                    | , <del>-</del> - |  |      |
|   | Forename(s)          |  | ,                |  |      |
|   | Surname              |  | , <u></u>        | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |      |
|   | Previous forename(s) |  |                  |  |      |
|   | Previous surname(s)  |  | <del>-</del>     |  |      |
|   | Address              |  |                  |  |      |
| Usual residentia  | ,                    |  |                  |  |      |
| address must be given. In the case of                               | Post town            |  |                  |  |      |
| corporation, give the registered or principal                       | 9 0                  | Postcode   |                  | <u></u>                                | -    |
| office address.   | Country              | Nationality                                      |                  |  | -    |
|   | Business occupation  |  |                  |  |      |
|   | Other directorships  |  |                  |  |      |
| * Voluntary details   |                      |  |                  |  |      |
|   |                      |  |                  |  |      |
|   | Name * Style / Title |  | Day              | Month                                  | Year |
|   | * Honours etc        | Date of birth                                    |                  |  |      |
|   | Forename(s)          |  |                  |  |      |
|   | Surname              |  |                  | -·                                     |      |
|   | Previous forename(s) |  |                  |  |      |
|   | Previous surname(s)  |  |                  |  |      |
|   | Address              |  |                  |  |      |
| Usual residential   |                      |  |                  |  |      |
| address must be<br>given. In the case of a<br>corporation, give the | FOSt tOWIT           |  |                  |  |      |
| registered or principal office address.                             | County / Region      | Postcode   |                  |  |      |
|   | Country              | Nationality                                      |                  |  |      |
|   | Business occupation  |  |                  |  |      |
|   | Other directorships  |  |                  |  |      |
|   |                      |  | -                |  |      |

Class Number of Aggregate (e.g. Ordinary/Preference) shares issued **Nominal Value** Issued share capital (see note 9) (i.e Number of shares issued Enter details of all the shares in issue multiplied by nominal value per share) at the date of this return. £≥ ORDINARY TNO £2 Totals しょくり List of past and present members There were no changes in the period (Use attached schedule where appropriate) A full list is required if one was not included with either of the last two returns. in another format on paper (see note 10) A list of changes is enclosed A full list of members is enclosed If at the date of this return an election is in force to dispense with Elective resolutions annual general meetings, mark this box (Private companies only) (See note 11) If at the date of this return an election is in force to dispense with laying accounts in general meetings, mark this box I certify that the information given in this return is true to the best of my Certificate knowledge and belief. **Date** Signed † a director /secretary † Please delete as appropriate. When you have signed the return send it continuation sheets. This return includes NIL with the fee to the Registrar of Companies. Cheques should be made payable to (enter number) Companies House. Please give the name, address, 180 HIGH STREET, RACHE RROWN & CO., telephone number, and if available, a DX number and Exchange, for HEATH.  $\lambda$ est MIDNANDS CRADNEY the person Companies House should contact if there is any query. 411499 BG4 5HN 01384 DX exchange DX number

| <b>Directors</b> (see no Please list directors in             | cal order.   | Details of new directors must be notified on form 288a |            |          |       |                  |         |       |             |  |  |  |
|---|--------------|--|------------|----------|-------|------------------|---------|-------|-------------|--|--|--|
| Name * Style / Title  * Honours etc                           |              | MR.  |            |          |       | Day              | Month   | Year  |             |  |  |  |
|   |              | Date of birth  |            |          |       | 17               | 02      | 36    |             |  |  |  |
|   | PETER DANIEN |  |            |          |       |                  |         |       |             |  |  |  |
|   |              | Surname  | Hicki      | EN       |       |                  |         |       |             |  |  |  |
|   | Previo       | us forename(s)   |            |          |       |                  |         |       |             |  |  |  |
|   | Previo       | ous surname(s)   |            |          |       |                  | -       |       |             |  |  |  |
|   | Address      | 3  | 6 R        | SSELL (  | CLOSE |                  |         |       |             |  |  |  |
| Usual residentia  | =            |  |            |          |       |                  |         |       |             |  |  |  |
| address must be given. In the case of a corporation, give the | ì            | Post town  | TIVIDA     | INE      |       |                  |         |       |             |  |  |  |
| registered or principa office address.                        |              | County / Region  | NEST       | MIDNANIC | s     | Postcode         | 369 3ND |       |             |  |  |  |
|   |              | Country  | ENGLA      | ND       |       | Nationality      | BRITISH |       |             |  |  |  |
|   | Busines      | s occupation   | DIRECTOR   |          |       |                  |         |       |             |  |  |  |
|   | Other di     | rectorships  |            |          |       |                  |         |       |             |  |  |  |
| * Voluntary details.  |              |  |            |          |       |                  |         |       |             |  |  |  |
|   |              |  |            |          |       |                  |         | .,    | <del></del> |  |  |  |
|   | Name         | * Style / Title  | HRS        |          |       |                  | Day     | Month | Year        |  |  |  |
|   |              | * Honours etc  |            |          | Di    | ate of birth     | 27      | اع    | 52          |  |  |  |
|   |              | Forename(s)  | JACQUELINE |          |       |                  |         |       |             |  |  |  |
|   |              | Surname  | TYLER      |          |       |                  |         |       |             |  |  |  |
|   | Previo       | us forename(s)   |            |          |       |                  |         |       |             |  |  |  |
|   | Previo       | ous surname(s)   |            |          |       |                  |         |       |             |  |  |  |
|   | Address      |  | 33 A       | SHLEY (  | LOSE, |                  |         |       |             |  |  |  |
| Usual residential address must be                             |              | ļ  |            |          |       |                  |         |       |             |  |  |  |
| given. In the case of a corporation, give the                 |              | Post town  | KINGOT     | HINFORD  |       |                  |         |       |             |  |  |  |
| registered or principal office address.                       |              | ounty / Region   | VEST       | MIDHAN   | 0.5   | Postcode         | 346     | 98>   | <           |  |  |  |
|   |              | Country  | EVGLA      | NO       |       | Nationality 3 Ru |         |       | ITISH       |  |  |  |
|   | Business     | s occupation   | SECRETARY  |          |       |                  |         |       |             |  |  |  |
|   | Other dir    | rectorships  |            |          |       |                  |         |       |             |  |  |  |
|   |              | Γ  |            |          | ,     |                  |         |       |             |  |  |  |

| Directors (continued)   |         |                 | Details of new directors must be notified on form 288a |  |     |                                       |               |       |      |  |  |
|---|---------|-----------------|--|--|-----|---------------------------------------|---------------|-------|------|--|--|
|   | Name    | * Style / Title |  |  |     |                                       | Day           | Month | Year |  |  |
|   |         | * Honours etc   |  |  |     | Date of birth                         |               |       |      |  |  |
|   |         | Forename(s)     |  |  |     |                                       | 11000.00      |       |      |  |  |
|   |         | . 5%.           |  |  |     |                                       |               |       |      |  |  |
|   | Previo  | ous forename(s) |  |  |     |                                       |               |       |      |  |  |
|   | Previ   | ous surname(s)  |  |  |     |                                       |               |       |      |  |  |
|   | Addres  | <b>5</b> .      |  | :                                      | . , |                                       |               |       |      |  |  |
| Usual residential   |         |                 |  |  |     |                                       |               | ,     |      |  |  |
| address must be given. In the case of a                       |         | Post town       |  |  |     |                                       |               |       |      |  |  |
| corporation, give the registered or principal                 | ,       | County / Region | :  |  |     | Postcode                              |               |       |      |  |  |
| office address.   |         | Country         |  | \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ |     | Nationality                           | <b>,</b>      |       |      |  |  |
|   | Busines | ss occupation   |  |  |     |                                       |               |       |      |  |  |
|   | Other d | irectorships    |  | ·-·                                    |     |                                       |               |       |      |  |  |
| * Voluntary details.  |         |                 |  |  |     |                                       |               |       |      |  |  |
|   |         |                 |  |  |     | ,                                     |               |       |      |  |  |
|   | Name    | * Style / Title |  |  |     |                                       | Day           | Month | Year |  |  |
|   | •       | * Honours etc   |  |  |     | Date of birth                         |               |       |      |  |  |
|   |         | Forename(s)     |  | · . 11                                 |     |                                       |               |       |      |  |  |
|   |         | Surname         |  | <u>;</u>                               |     |                                       | <del></del> . |       |      |  |  |
|   | Previ   | ous forename(s) |  | <u></u>                                |     |                                       |               |       |      |  |  |
|   | Prev    | ious surname(s) |  |  |     | · · · · · · · · · · · · · · · · · · · |               |       |      |  |  |
|   | Addres  | s               |  |  |     |                                       |               |       |      |  |  |
| Usual residential   | ī       |                 |  |  |     |                                       |               |       |      |  |  |
| address must be given. In the case of a                       | l       | Post town       |  |  |     |                                       | <u></u>       |       |      |  |  |
| corporation, give the registered or principal office address. |         | County / Region |  | <u> </u>                               |     | Postcode                              |               |       | ·    |  |  |
| onice address.  |         | Country         |  | • •                                    | . , | Nationalit                            | y             | ,     |      |  |  |
|   | Busine  | ss occupation   |  |  | · · |                                       |               |       |      |  |  |
|   | Other o | lirectorships   |  |  |     |                                       |               |       |      |  |  |
|   |         |                 |  |  |     | <del></del>                           |               |       |      |  |  |