

## HOUSE COMPANIES

of company number 01281601

company name

APPLIED FOUNDRY SERVICES LIMITED

company type

PRIVATE COMPANY LIMITED BY SHARES

THE REGISTRAR OF COMPANIES COMPANIES HOUSE CROWN WAY

CARDIFF CF4 3UZ



This form should be completed in black.

The information printed below is taken from Companies House records as at 02/12/98 If this information requires amendment use the spaces opposite.

## Date of this return (See note 1)

The information in this return should be made up to a date not later than

	Day	Month	Year
1	218	1  2	9 18

## 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.

Registered Office (See note 3)

This is the address registered by Companies House.

4A WALL END CLOSE LEAMORE IND ESTATE BLOXWICH WEST MIDS WS2 7PH

**Principal business activities** (See note 4)

Trade classification is 3710 RECYCLING OF METAL WASTE AND SCRAP

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

If you are making the return up to an earlier date, show the date here. Please note that the form must be delivered to Companies House within 28 days of this earlier date.

Day	MOIII	I Cal
1		
Day	Month	Year

-		
	<u> </u>	

Page 1

01281601  Register of members (See note 5)	If the information shown needs amendment, give details below and, for secretary and director particulars, the date of any change.
The register is kept at	
19-21 NEW ROAD	
WILLENHALL	
WEST MIDLANDS	••
WV13 2BG	•
Register of debenture holders (See note 6)	
Any register of debenture holders (or duplicate) is kept at	
	***************************************
	•••••
Company Secretary (See note 7)	
Particulars of a new secretary must be notified on form 288.	Day Month Year
101111 200.	Date of any change.
CRAIG LEIGH	***************************************
RICHARDS	***************************************
218 CANNOCK ROAD	
WESTCROFT	***************************************
WOLVERHAMPTON	
WEST MIDLANDS WV10 8QN	***************************************
	***************************************
	***************************************
16.41.1	Day Month Year
If this person has ceased to be secretary, please	
state when.	Date of resignation.
· · · · · · · · · · · · · · · · · · ·	en de la companya de La companya de la co
Directors (See note 7)	Day Month Year
Particulars of a new director must be notified on	Date of any change.
form 288.	
COLIN RAYMOND	
RICHARDS	***************************************
218 CANNOCK ROAD	
WESTCROFT	
WOLVERHAMPTON	***************************************
WEST MIDLANDS WV10 8QN	***************************************
en e	***************************************
the second secon	•••••
Date of Birth:- 25/11/44	
Nat:BRITISH	
Occ:DIRECTOR	
	Paris Maril M
If this person has ceased to be director, please	Day Month Year
state when.	Date of resignation.
Show any relevant current and previous directorships.	
Page 2	***************************************
<del>-</del>	

Particulars.    Day   Month   Year	01281601	If the information shown needs amendment, give details below and the date of any change.		
Particulars.	Directors - continued			
OR DIRECTORS MUST BE NOTIFIED ON FORM 288a.  If this person has ceased to be director, please state when.  Show any relevant current and previous directorships.  Day Month Year  Date of resignation.  Day Month Year  Date of any change.  Day Month Year  Date of resignation.  Date of resignation.	Particulars.			
If this person has ceased to be director, please state when.  Particulars.  Day Month Year  Date of resignation.  Date of any change.  Day Month Year  Date of resignation.  If this person has ceased to be director, please state when.  Particulars.  Day Month Year  Date of resignation.  Date of any change.  Day Month Year  Date of any change.  Day Month Year  Date of any change.  If this person has ceased to be director, please state when.  Date of any change.		***************************************		
If this person has ceased to be director, please state when.  Show any relevant current and previous directorships.  Day Month Year   Date of resignation.  Day Month Year   Date of any change.  Day Month Year   Date of any change.  Day Month Year   Date of any change.  If this person has ceased to be director, please state when.  Day Month Year   Date of any change.  If this person has ceased to be director, please state when.  If this person has ceased to be director, please state when.  Show any relevant current and previous directorships.				
If this person has ceased to be director, please state when.    Day   Month   Year     Date of resignation.		***************************************		
If this person has ceased to be director, please state when.  Particulars.  Date of resignation.  Date of resignation.  Date of resignation.  Date of any change.  Date of resignation.  If this person has ceased to be director, please state when.  Date of resignation.  Date of resignation.  Date of resignation.  Date of resignation.				
Particulars.    Day   Month   Year   Date of any change.				
No More directors — additional secretaries OR directors Must be notified on form 288a.  If this person has ceased to be director, please state when.  Particulars.  Date of any change.  Day Month Year	Show any relevant current and previous directorships.	***************************************		
OR DIRECTORS MUST BE NOTIFIED ON FORM 288a.  If this person has ceased to be director, please state when.  Day Month Year   Date of resignation.  Day Month Year   Date of any change.  Day Month Year   Date of any change.  Day Month Year   Date of any change.  NO MORE DIRECTORS — ADDITIONAL SECRETARIES OR DIRECTORS MUST BE NOTIFIED ON FORM 288a.  If this person has ceased to be director, please state when.  Show any relevant current and previous directorships.	Particulars.			
If this person has ceased to be director, please state when.  Day Month Year   Date of resignation.  Particulars.  Day Month Year   Date of any change.  NO MORE DIRECTORS — ADDITIONAL SECRETARIES OR DIRECTORS MUST BE NOTIFIED ON FORM 288a.  If this person has ceased to be director, please state when.  Day Month Year   Date of any change.  Day Month Year   Date of resignation.				
If this person has ceased to be director, please state when.  Day Month Year   Date of resignation.  Particulars.  Day Month Year   Date of any change.  NO MORE DIRECTORS — ADDITIONAL SECRETARIES OR DIRECTORS MUST BE NOTIFIED ON FORM 288a.  If this person has ceased to be director, please state when.  Day Month Year   Date of any change.  Day Month Year   Date of resignation.				
If this person has ceased to be director, please state when.  Day Month Year   Date of resignation.  Particulars.  Day Month Year   Date of any change.  NO MORE DIRECTORS — ADDITIONAL SECRETARIES OR DIRECTORS MUST BE NOTIFIED ON FORM 288a.  If this person has ceased to be director, please state when.  Day Month Year   Date of any change.  Day Month Year   Date of resignation.				
If this person has ceased to be director, please state when.  Day Month Year Date of any change.  Day Month Year Date of any change.  No More Directors — Additional Secretaries OR Directors Must be Notified on Form 288a.  If this person has ceased to be director, please state when.  Day Month Year Date of any change.		***************************************		
Particulars.  Day Month Year		<del>                                      </del>		
NO MORE DIRECTORS — ADDITIONAL SECRETARIES OR DIRECTORS MUST BE NOTIFIED ON FORM 288a.  If this person has ceased to be director, please state when.  Date of any change.  Day Month Year  1 1 1 Date of resignation.	Show any relevant current and previous directorships.			
OR DIRECTORS MUST BE NOTIFIED ON FORM 288a.  If this person has ceased to be director, please state when.  Day Month Year Date of resignation.  Show any relevant current and previous directorships.	Particulars.			
If this person has ceased to be director, please state when.  Day Month Year I Date of resignation.  Show any relevant current and previous directorships.				
If this person has ceased to be director, please state when.  Day Month Year I Date of resignation.  Show any relevant current and previous directorships.				
If this person has ceased to be director, please state when.  Day Month Year I Date of resignation.  Show any relevant current and previous directorships.				
If this person has ceased to be director, please state when.  Day Month Year I Date of resignation.  Show any relevant current and previous directorships.				
Show any relevant current and previous directorships.		Day Month Year		
	·			

01281601 Issued Share Capital (See note 8)	Class (eg Ordinary/	Number of shares issued	Aggregate nominal value
Enter details of all shares in issue at the date of this return.	Prejerence etc)		(ie Number of shares issued multiplied by nominal value per share)
	CRPINARY	(00	100
	Totals	100	£100
List of past and present members (See note 9)			
(Use attached schedule where appropriate) A full list is required if one was not included with either of the last two returns.	ull list is required if one was not included with		
The last full members list was at 28/12/97	A list of chang A full list of m	es is enclosed embers is enclos	on paper paper  ed   not on paper  paper
Elective resolutions (See note 10) (Private companies only)			
If an elective resolution is in force at the date of this return to dispense with annual general meetings, mark this box.			
If an elective resolution is in force at the date of this return to dispense with laying accounts in general meetings, <i>mark this box</i> .			
Certificate	Signed	3/1/	Secretary/Director *
I certify that the information given in this return is true to the best of my knowledge and belief.	Date 1	199.	*(delete as appropriate)
i enclose the fee of £15.  Cheques should be made payable	This return inc	(enter numbe	
to Companies House.	Please ensure that you have completed all sections on this page.		
To whom should Companies House direct any enquiries about the information shown in this return?>	BARNETT 19-21 NE WULENTA	w.	•
		Augs Postcode	e WV13 28G
•	Telephone o	1902 604011	Ext