Package:

'Laserform'

by Laserform International Ltd.

Please complete in typescript, or in bold black capitals.

CHFP025

MIDLAND.

363a

**Annual Return** 

Company	Number
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3495187

**Company Name in full** 

JEAD	LIMITED		_		
ı					

### Date of this return

The information in this return is made up to

Day Month Year

[2 [0 /[0 [1 /[2 [0 [0 [0

#### 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

20 OLD BAILEY

## Registered Office

Show here the address at the date of this return.

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

Post town

LONDON

County / Region

UK Postcode

E C 4 M 7 B H

#### Principal business activities

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

7484

.

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:

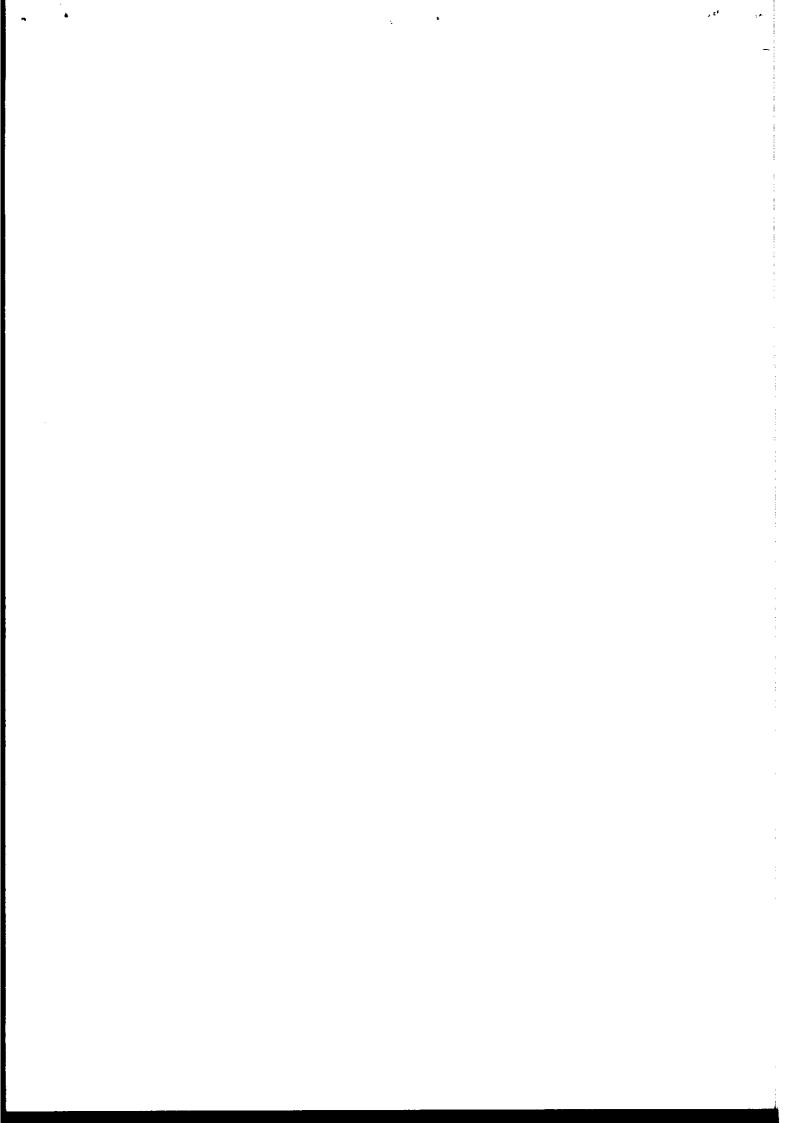
Companies House, Crown Way, Cardiff, CF14 3UZ DX 33050 Cardiff for companies registered in England and Wales

or

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

DX 235 Edinburgh

**COMPANIES HOUSE** 

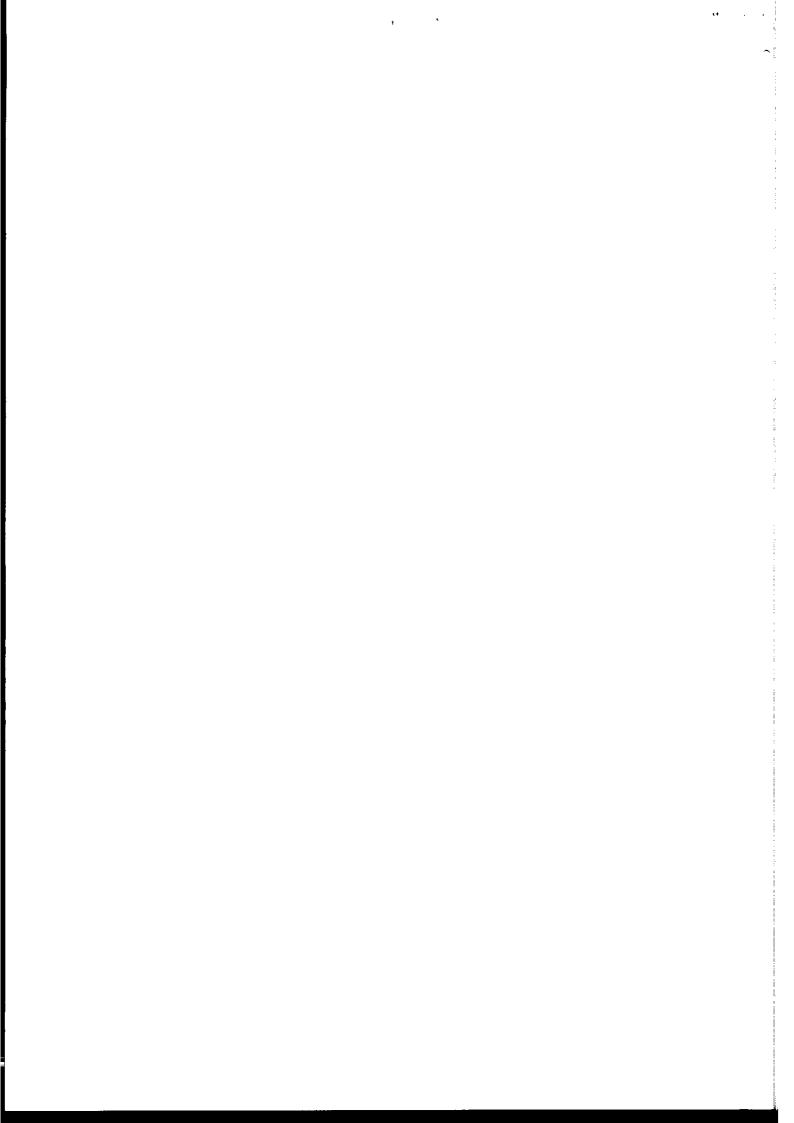


Register of me		AT DEGISTEDED OFFICE
_	embers is not kept at the	AT REGISTERED OFFICE
registered office, st	ate here where it is kept.	
	Post town	
	County / Region	UK Postcode , , , , , , , , , , , , , , , , , , ,
Posister of Dal	aantura haldara	
	<b>Denture holders</b> er of debenture holders,	
_	ny such register or part	
	kept at the registered	
office state here w		
	·	
	Post town	1
	County / Region	UK Postcode
Company type		
company type		
Public limited company		
Private company limited	d by shares	x
Brivata aomany limitas	t by guarantae without	
Private company limited share capital	a by guarantee without	
-	d by shares exempt under	Please tick the appropriate box
section 30	a by sindres exempt ander	Flease tick the appropriate box
Private company limited	d by quarantee exempt	
under section 30	a by gadiantoo oxompt	
Private unlimited compa	any with share capital	
Private unlimited compa	any without share capital	
Company Coor	otor.	
Company Secr	etary	Details of a new company secretary must be notified on form 288a.
(Please photocopy this area to provide	Name * Style / Title	
details of joint sec-		
retaries).	Forename(s)	1
* Voluntary details.		
If a partnership give	Surname	JORDAN COMPANY SECRETARIES LIMITED
the names and		
addresses of the part- ners or the name of	Address	21 ST. THOMAS STREET
the partnership and		
office address.		
Usual residential		
address must be	I OST TOWN	BRISTOL
given. In the case of a corporation or a		
Scottish firm, give	County / Region	UK Postcode   B   S   1     6   J   S
the registered or prin-		
cipal office address.	Country	1

Directors Please list directors in alphabetical order.		Details of new directors must be notified on form 288a			
N	ame * Style / Title				
Directors In the case of a director that is a corporation or a	Date of birth	Day Month Year			
Scottish firm, the name is the corporate or firm name.	Forename(s)	JOHN FRANCIS			
	Surname	DEVANEY	_		
A	ddress	KETTLESHILL			
Usual residential		UNDER RIVER			
address must be given. In the case of a	Post town	SEVENOAKS			
corporation or a Scottish firm, give the registered or principal	County / Region	KENT   UK Postcode   T   N   1   5   0   R	X		
office address.	Country	Nationality BRITISH			
	Business occupation	EXECUTIVE CHAIRMAN			
* Voluntary details.	ame * Style / Title				
Directors In the case of a director that		Day Month Year			
is a corporation or a Scottish firm, the name is the corpo- rate or firm name.	Date of birth Forename(s)	2 4 / 1 1 / 1 9 4 7  DAVID			
	Surname	WILSON			
Address		5 VAT HOUSE			
Usual residential address must be given. In the case of a		REGENTS BRIDGE GARDENS			
corporation or a Scottish firm, give the	Post town	LONDON			
registered or principal office address.	County / Region	UK Postcode S W 8 1 1 H	D		
	Country	Nationality   BRITISH			

Business occupation DIRECTOR

Issued share capital Enter details of all the shares in issue at the date of this return.	Class (e.g. Ordinary/Preference)  ORDINARY	Number of shares issued	Aggregate Nominal Value (i.e. Number of shares issued multiplied by nominal value per share, or total amount of stock)
	Totals	[2	£2
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 change	es in the period on paper	in another format
	A list of changes is enc		
Certificate	I certify that the information knowledge and belief.		·
Signed  †Please delete as appropriate.	†a director / secretary	Date	4. 2. 00
When you have signed the return send it with the fee to the Registrar of Companies. Cheques should be made payable to <b>Companies House</b> .	This return include	es l con	tinuation sheets.
Please give the name, address, telephone number and, if available, a DX number and Exchange, for the person Companies House should contact if there is any query.	Arthur An 20 Old Ba London EC4M 7A	iley	



# Package:

'Laserform'

by Laserform International Ltd.

# List of past and present shareholders Schedule to form 363a

CHFP025

**Company Number** 

3495187	

# Company Name in full $_{\rm \lfloor JEAD\ LIMITED}$

- > 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

	Class and	Shares or amount of stock transferred		
Shareholders' details	number of shares or amount of stock held	Class and number of shares or amount of stock transferred	Date of registration of transfer	
Name	1			
JOHN_DEVANEY				
Address				
AS_ABOVE				
L			i	
L				
UK Postcode				
Name	1			
DAVID WILSON				
Address				
AS_ABOVE				
L				
L				
UK Postcode LLLLLL				
Name				
L				
Address				
			! :- [	
L				
<u> </u>				
UK Postcode				

