

C O M P A N I E S H O U S E

MW 10 931 363b

Annual Return

of company number CN

Month

1165704

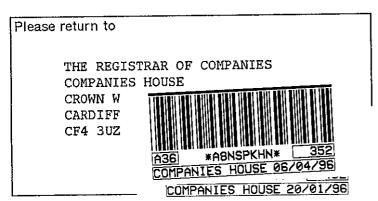
S

company name

Day

THE ASSOCIATION OF MODEL AGENTS LIMITED

Year



This form should be completed in black.

Date of this return(See note 1)

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

If you are making the return up to an earlier date please show the date here.

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.

DA 0|8 1|1 9|5

Registered Office(See note 3)

This is the address registered by Companies House as at 18/10/95

15-19 CAVENDISH PLACE LONDON W1M ODD

Use this space to notify a change of	of registered office address.
RO	
Post Town	
County/Region	
Postcode	·

Principal business activities

(See note 4)

Show trade classification code number for principal activity or activities.

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

PA 8 9 9 7	

Register of members

(See note 5)

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

Post Town ______ County/Region ______ Postcode _____

Register of Debenture holders

(See note 6)

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

RD	
Post Town	
County/Region	
Postcode	

Company type(See note 7)

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.

✓.	
e S	
	•
	✓.

Please mark the appropriate box

Company Secretary(See note 8) (Please photocopy this area to provide details of joint secretaries) *Style/Title

Forenames

Surname

*Honours etc

Previous forenames

Previous surname

Address

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

Voluntary details

Details of a new company secretary must be notified on form 288.	
cs	
APRIL	
BUCKS BURY	
	للـــــــــــــــــــــــــــــــــــ
	į.
AD 8 ENBANEMENT GARDEN,	<u>-</u>
Post Town	
County/Region	
Postcode SN3 41J Country	

116,5704	You may photocopy this page to provide details of additional directors.
Directors (continued) (Ste note 8)	Details of new directors must be notified on form 288
Name *Style/Title	CD MR
Forenames	NICHOLAS JOHN
Surname	YOUNG
*Honours etc	
Previous forenames	
Previous surname	
Address	AD // LAKESIDE,
Usual residential address must be given. In the case of a corporation, give the registered or principal office address.	Post Town 10000
	County/Region
	Postcode 0/3 8州ハ Country
Date of birth	Day Month Year DO / 1 0 6 4 9 Nationality NA BRITISH
. Business occupation	OC CO DIRECTOR EMPLOYMENT AGENT
Other directorships	OD
•	
Name *Style/Title	CD MRS
Forenames	ELIZABETH JANE
Surname	CHALVET BAUNY DE RECY
*Honours etc	
Previous forenames	
Previous surname	STEELE
Address	AD 506 NELSON HOUSE,
Usual residential address must be given. In the case of a	BOUPHIN SOURKE,
corporation, give the registered or principal office address.	Post Town AONOON
	County/Region
	Postcode SWIV 3LX Country
Date of birth	Day Month Year DO 0 8 0 7 6 2 Nationality NA BRITISH
Business occupation	OC MODEL AGENT
Other directorships	OD
* Voluntary details	
voluntary details	

1165704	You may photocopy this page to provide details of additional directors.		
Directors (continued) (See note 8)	Details of new directors must be notified on form 288		
Name *Style/Title			
Forename	1		
Surnam	e 00EN		
*Honours et	c		
Previous forename	s		
Previous surnam			
Address	AD 14 CLARENDON GARDENS,		
Usual residential address must be given. In the case of corporation, give the registered oprincipal office address.	Post Town ZONDON		
	Postcode 69 /AY Country Day Month Year		
Date of birt	h DO 0 6 0 8 5 1 Nationality NA BRITISH		
Business occupation	n oc model agent.		
Other directorship	S OD		
Name *Style/Titl	e CD GABRIELLA		
Forename			
Forename Surnam	PALMANO		
	PALMANO		
Surnam	PALMANO		
Surnam*Honours e	PALMANO De PALMAN		
*Honours e Previous forename	PALMANO BE PALMANO BE BE BE BE BE BE BE BE BE B		
Surnam *Honours e Previous forename Previous surnam	PALMANO DE PALMANO DE POST TOWN LONDON POST TOWN LONDON		
*Honours ender Previous forenament Previous surnament Previous surname	PALMANO DE PALMAN		
*Honours ender Previous forenament Previous surnament Previous surname	PALMANO AD IS ARGYLL MANSIONS, BE AD IS ARGYLL		
*Honours ender Previous forenament Previous surnament Previous surname	PALMANO DE PALMANO DE PALMANO DE POST TOWN LONDON County/Region Postcode SW3 Country Day Month Year		
*Honours ender Previous forenament Previous surnament Previous surname	PALMANO AD 15 ARGYLL MANSIONS, BE AD 15 ARGYLL		
*Honours ender Previous forenament Previous surnament Previous surname	PALMANO AD (5 ARGYLL MANSIONS, 311 KINGS ROAD, Post Town LONDON County/Region Postcode SW3 Country Day Month Year DO 012 01 6 2 Nationality NA BRITISH OC MODEL AGENT		

Continuation Sheet

,1165704	·
Directors (See note 8) Please list directors in alphabetical order	Details of new directors must be notified on form 288
Name ► *Style/Title	CD MR
Forenames	
Surname	CHAMBERS
*Honours etc	
Previous forenames	
Previous surname	
Address	AD 29 CHERSTON ROAD,
Usual residential address must be given. In the case of a corporation, give the registered or principal office address.	Post Town 2000 ON
	County/Region
	Postcode W2 58P Country
Date of birth	RRITISH
Business occupation	OC MODEL ACTENT
Other directorships	ОД
	·
Name *Style/Title	LAURENCE PETER
Forenames	<u> </u>
Surname	KUHRT
*Honours etc	
Previous forenames	
Previous surname	<u> </u>
Address	AD 6 ST CATHERINES MENS,
Usual residential address must be given. In the case of a corporation, give the registered or principal office address.	Post Town 40000
	County/Region
	Postcode SW3 ZPX Country
Date of birth	RRITISH
Business occupation	OC MODEL AGENT
Other directorships	OD
* Voluntary details	

		V-	, *
Issued share capital (See note 9) Enter details of all the shares in	Class	Number	Aggregate Nominal Value
issue at the date of this return.			• • • • • • • • • • • • • • • • • • • •
	·		· · · · · · · · · · · · · · · · · · ·
	Totals		
List of past and present members (See note 10) (Use attached schedule where appropriate)			Please mark the appropriate box(es)
A full list is required if one was not included with either of the last two returns.	There were no changes i		paper not on paper
The last full members list was at	· A list of changes is encl		
	A full list of members is	s enclosed	
		· ·	
Elective resolutions (See note 11)			
(Private companies only)	If an election is in force with annual general mee		n to dispense
	If an election is in force with laying eccounts in	at the date of this return general mostings, weak	th's base.
Certificate			
I certify that the information given in this return is true to the best of my knowledge and belief.	Signed		Compton / Director *
I enclose the fee of £18.	Date [8 1	96	Secretary/Director * (* delete as appropriate)
	This return includes	continua enter number)	tion sheets.
To whom should Companies	· · · · · · · · · · · · · · · · · · ·		
House direct any enquiries about the information shown in this	BOWICER ORFO	DRD 2 CO.	
return?	15-19 CAUENDISH PLACE,		
	10N00N		
	<u></u>	Po	ostcodeWM ODD
	Telephone 0/7/-6:	366 391 EX	tension
	 your principal business a dates of birth of all direct 	·	

Page 4

- a signature of either a director or secretary?

- a members list (if required)?

- a cheque made payable to Companies House?

Printed on Recycled Paper