

Please complete in typescript, or in bold black capitals.

C



HFP000	Annual Return
Company Num	o2943042
Company Name in	full Auto BODY LANGUAGE LIMITED
	Day Month Year
Date of this return The information in this return is made up to	
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 he Companies House will then send a for at the appropriate time.	
Registered Office Show here the address at the date of this return.	HOLMETHORPE INDUSTRIAL ESTATE
Any change of Pos registered office must be notified on form 287. UK Pos	Region Surrey
Principal business activities	
Show trade classification code numb for the principal activity or activities.	er(s)
If the code number cannot be determined a brief description of principal and	, and the second
	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

0158

18/11/00

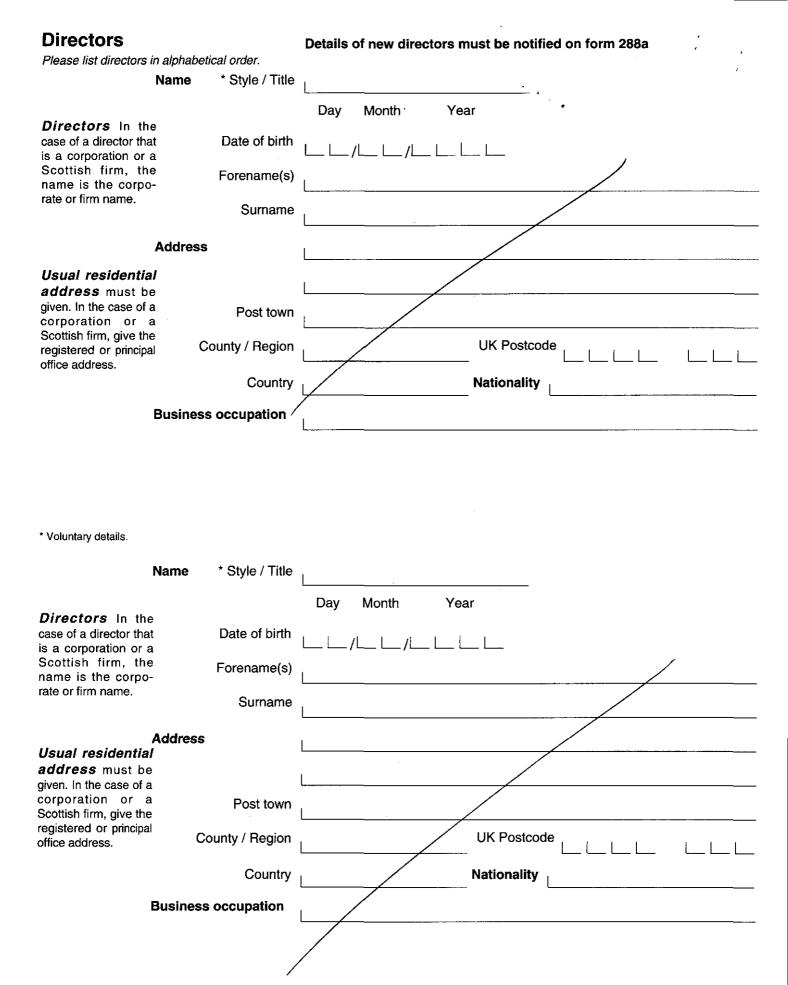
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COMPANIES HOUSE
Form revised September 1999

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB DX 235 Edinburgh for companies registered in Scotland

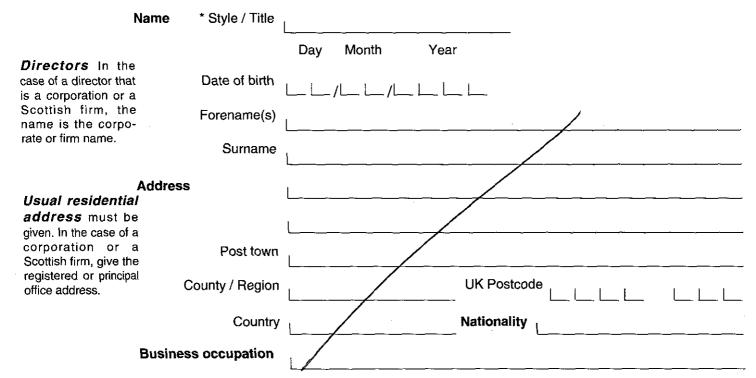
for companies registered in England and Wales

Register of file		· 1			
	embers is not kept at the atte here where it is kept.	N/A			
		I /A .			
	Post town	, · ·			
	County / Region	UK Postcode			
Register of Debenture holders If there is a register of debenture holders, or a duplicate of any such register or part of it, which is not kept at the registered office, state here where it is kept.		<u> </u>			
	Post town	1			
	County / Region	UK Postcode			
Company type					
Public limited compa	ny				
Private company limi	ted by shares				
Private company limi share capital	ted by guarantee without				
Private company limited by shares exempt under section 30		> Please tick the appropriate box			
Private company limi under section 30	ted by guarantee exempt				
Private unlimited con	npany with share capital				
Private unlimited con	npany without share capital				
Company Secr	etary	Details of a new company secretary must be notified on form 288a.			
details of joint sec-	Name * Style / Title				
retaries). * Voluntary details.	Forename(s)	BUSAN ELIZABETH			
If a partnership give	Surname	MORRISS			
the names and addresses of the partners or the name of Address		23 HENLEY CLOSE			
the partnership and office address.		MAIDENBOWER			
Usual residential	Post town	Crowier			
address must be given. In the case of a County / Regio		LII/ Destendence			
corporation or a Scottish firm, give the registered or prin-		W. Sussex UK Postcode RH10 7QU			
cipal office address.					

Directors		Details of new directors must be notified on form 288a		
Please list directors in alphabetical order.				
Name	* Style / Title	Ma		
Pinatana I. I	•	Day Month Year		
Directors In the case of a director that is a corporation or a	Date of birth	01/04/1966		
Scottish firm, the name is the corporate or firm name.	Forename(s)	DAVID		
rate of filliff flame.	Surname	Morriss		
Address		23 Hencer Close		
Usual residential		MAIDENBOWER		
address must be given. In the case of a	Post town	CRAMLEY		
corporation or a Scottish firm, give the registered or principal	County / Region	W Sussex UK Postcode N H 1 0 7 Q 4		
office address.	Country	ENGLAND Nationality BRITISH		
Busin	ess occupation	COMPANY DIRECTOR		
* Voluntary details.				
Name	e * Style / Title			
Directors In the case of a director that	·	Day Month Year		
is a corporation or a Scottish firm, the name is the corporate or firm name.	Date of birth	L_ L_/L_ L_ L_ L_		
	Forename(s)	· L		
	Surname	·		
Address				
Usual residential address must be				
given. In the case of a corporation or a Scottish firm, give the registered or principal office address.	Post tow			
	County / Regio			
	Countr	Nationality		
Business occupation				



^{*} Voluntary details.



Issued share capital

Enter details of all the shares in issue at the date of this return.

Class

(e.g. Ordinary/Preference)

Number of shares issued

Aggregate Nominal Value

(i.e Number of shares issued multiplied by nominal value per share, or total amount of stock)

	ORDINARY	2	2
		Lave	Leave
	<u> </u>	<u> </u>	
	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	There were no changes	in the period	
returns.	A list of changes is enclo	on paper	in another format
	A full list of shareholders	s is enclosed	
Certificate	I certify that the informati	ion given in this return i	s true to the best of my
Signed	Inau Main.	Date	15/11/2
† Please delete as appropriate.	† a director /secretary		
When you have signed the return send in with the fee to the Registrar of Companies Cheques should be made payable to Companies House.	this return include	(enter number)	ntinuation sheets.
Please give the name, address, elephone number, and if available, a DX number and Exchange, for the person Companies House should			
contact if there is any query.		Tel [
	DX number	DX exchange	