

nus 45 003454

363a

Please complete in typescript, or in bold black capitals.

Annual Return

Company Number

02294547

Company Name in full

BLOWPLAST LIMITED

Year



Date of this return (See note 1)

The information in this return is made up to

99 90

Month

Day

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.

Month Year Day

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

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

Post town

Postcode

County / Region

2524

BUCKS HP12 4HJ

HIGH WYCOMBE

HILLBOTTOM ROAD

Principal business activities

(See note 4)

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

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, CF4 3UZ DX 33050 Cardiff for companies registered in England and Wales

SANDS MOUSTRIAL ESTATE

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



Form revised March 1995

Register of members (See note 5) If the register of members is not kept at the								
registered office, state here where it is kept.						, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		
Post town								
		County / Region				Postcode		
Register of Deb	enture l	holders						
(See note 6) If there is a register and it is not kept						114		
and it is not kept at the registered office, state here where it is kept.								
	Post town					,		
	C	County / Region		_		Postcode		
Company type	(See note 7	か		- -1				
Public limited company								
Private company limite	ed by share	es						
Private company limite share capital	ed by guara	antee without						
Private company limite section 30	ed by share	es exempt under	Please mark the appropriate box					
Private company limited by guarantee exempt under section 30		antee exempt						
Private unlimited comp	pany with s	hare capital						
Private unlimited company without share capital								
Company Secre	etary (see	notes 1-5)						
(Please photocopy			Details of a new	compa	ny secretary	must be no	tified on fo	rm 288a.
this area to provide details of joint secretaries).	Name	* Style / Title	MRS		* -	lonours etc		
secretanesj.		Forename(s)	JAIMIN	/				
		Surname	PATEL					
* Voluntary details.	Previou	ıs forename(s)						
	Previous surname(s)					<u> </u>		
Address		22 MARLOW RUAD						
Usual residential	Post town			-				
address must be given. In the case of a			HIGH WYCOMBE					
corporation, give the registered or principal	0	ounty / Region	Bucks			Postcode	1+811	ITB
office address.		Country						

Directors (see notes 1-5) Please list directors in alphabetical order.			Details of new director	rs must be no	tified on for	n 288a				
*	Name * Style / Title		MR			Day	Month	Year		
		* Honours etc		Da	ate of birth	19	70	53		
		Forename(s)	PATEL							
		Surname	PATEL							
	Previo	ous forename(s)								
Previous surname(s)										
Address			22 MARLOW ROAD							
Usual residential										
address must be given. In the case of a corporation, give the		Post town	14GH WYCOMBE							
registered or principal office address.	(County / Region	Bucks		Postcode	14B	11 17	В		
		Country			Nationality	KE	UYAA	/		
	Busines	ss occupation	BUSINESSMI							
ı	Other d	irectorships								
* Voluntary details.										
	Name	* Style / Title			F	Day	Month	Year		
* Honours etc Forename(s)				D	ate of birth					
						······································				
Surname										
Previous forename(s) Previous surname(s) Address										
								ļ		
Usual residential							<u> </u>			
address must be given. In the case of a		Post town								
corporation, give the registered or principa office address.		County / Region			Postcode					
		Country			Nationality					
	Busines	ss occupation								
Other directorships										

Directors (continu	ued)	Details of new directors must be notified on form 288a						
	Name * Style / Ti	tie Day Month Year						
	* Honours	etc Date of birth						
	Forename	(s)						
	Surnar	ne						
	Previous forename	(s)						
	Previous surname	(s)						
	Address							
Usual residential								
address must be given. In the case of a	Post to	vn						
corporation, give the registered or principal office address.	County / Regi	on Postcode						
omos addrosos.	Coun	Nationality Nationality						
1	Business occupation	1						
Other directorships								
* Voluntary details.								
		,						
1	Name * Style / Ti	Day World feat						
	* Honours e							
	Forename(
	Surnan							
	Previous forename(s)						
	Previous surname(s)						
1	Address							
Usual residential								
address must be given. In the case of a	Post tov	/n						
corporation, give the registered or principal office address.	County / Region	on Postcode						
onice address.	Count	ny Nationality						
F	Business occupation							
(Other directorships							

Issued share capital (see note 9) Enter details of all the shares in issue at the date of this return.	Class (e.g. Ordinary/Preference)	Aggregate Nominal Value (i.e Number of shares issued multiplied by nominal value per share)	
	ORDINARY	125,000	\$125,000
	Totals	125,000	1/25,000
List of past and present members (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. (see note 10)	A list of changes is encl	on pape	r in another format
	A full list of members is	enclosed	
Elective resolutions (Private companies only) (See note 11)	If at the date of this retu	ırn an election is in forc annual general meeti	
	If at the date of this retu laying acc	ırn an election is in forc counts in general meeti	
Certificate	I certify that the informa knowledge and belief.	ition given in this return	is true to the best of my
† Please delete as appropriate.	t a director /secretary	Dat	te 2/12/97
When you have signed the return send it with the fee to the Registrar of Companies. Cheques should be made payable to Companies House.	This return includ	les (enter number)	ontinuation 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.		Tel	
	DX number	DX exchange	

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) Surname								
	Previo	us forename(s)						
Previous surname(s)								
Address								
Usual residential								
address must be given. In the case of a		Post town						
corporation, give the registered or principal office address.		County / Region						
omoo add		Country	Nationality					
	Busines	s occupation						
Other directorships							_	
* Voluntary details								
	Name	* Style / Title			Day	Month	Year	
		* Honours etc		Date of birth				
		Forename(s)						
Surname								
	Previo	us forename(s)			,			
	Previous surname(s)							
	Address							
Usual residential								
address must be given. In the case of a		Post town			. <u> </u>			
corporation, give the registered or principal office address.	С	ounty / Region		Postcode				
		Country		Nationality				
I	Busines	s occupation						
•	Other dir	rectorships						