



Please complete in typescript, or in bold black capitals. CHWP000

## 288a

**APPOINTMENT** of director or secretary (NOT for resignation (use Form 288b) or change of particulars (use Form 288c))

******											
Company Number  Company Name in full			4893226			<u> </u>					
			CROFT MEDICAL CENTRE LIMITED								
			Day Mon	th Year				Day	Month		Year
		Date of		. 1		†Dat	i	0 . 3	<del></del>	1.	9,7,1
		appointment	1 7 1	1 2 0 0	3	Birth					
Appointment	Appointr	nent as director	<b>'</b>	as sec	retary				e appropriate i nd secretary m		
<b>form</b> Notes on completion appear on reverse.	NAME	*Style / Title	MR			*Honou	ırs etc				
			<u> </u>								
		Forename(s)	VINESH								
		Surname	AGGARWAL								
	Previous Forename(s)		Previous								
			· · · · · · · · · · · · · · · · · · ·			Surnan	ne(s)	4			
†† Tick this box if the address shown is a	™ US	ual residential address	61 WOLVERHAMPTON STREET								
service address for the beneficiary of a Confidentiality Order granted under the provisions of section 723B of the Companies Act 1985		Post town	WILLENHALL Postcode WV13 2						IF		
	C	County / Region	WEST MIDLANDS Country UK								
	<sup>†</sup> National		BRITISH †Business occupation ACCOUNTANT								
1-	†Other directorships		•								
(additional space overleaf)			consent to act as ** director / secretary of the above named company								
* Voluntary details.	Consent signature  1e Signed		855	كحم	2		Da	ate	17.11	<u>ج</u>	£03
† Directors only.  **Delete as appropriat			A director, secretary etc must sign the form below.								
Boloto do appropriat			W.	) I G	09		Da	ate	17.1	ι.	20¢7
You do not have to give any contact information in the box opposite but if you do, it will help Companies House to			(**a director / <del>s</del>	ocrotary / ad <b>enin</b> is	trator / ad	dministrati	ve receiv	er/red	elver manage	r/⊤eo	eiver)
contact you if th	nere is a	query on the									
form. The conta	Tel										
give will be visible to searchers of the public record			DX number DX exchange								
			When you have completed and signed the form please send it to the Registrar of Companies at:								

Companies House, Crown Way, Cardiff, CF14 3UZ

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB

for companies registered in England and Wales

for companies registered in Scotland

DX 33050 Cardiff

DX 235 Edinburgh

A35 COMPANIES HOUSE Form April 2002

0268

20/11/03

	Company Number	4893226	
† Directors only.	†Other directorships		
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## **NOTES**

Show the full forenames, NOT INITIALS. If the director or secretary is a corporation or Scottish firm, show the name on surname line and registered or principal office on the usual residential line.

Give previous forenames or surname(s) except:

- for a married woman, the name by which she was known before marriage need not be given.
- for names not used since the age of 18 or for at least 20 years

A peer or individual known by a title may state the title instead of or in addition to the forenames and surname and need not give the name by which that person was known before he or she adopted the title or succeeded to it.

## Other directorships.

Give the name of every company incorporated in Great Britain of which the person concerned is a director or has been a director at any time in the past five years.

You may exclude a company which either is, or at all times during the past five years when the person concerned was a director, was

- dormant
- a parent company which wholly owned the company making the return, or
- another wholly owned subsidiary of the same parent company.