

COMPANIES HOUSE NW-008875-514

363a

| or in bold black capitals | | Annual Return |
|---|------------------------------------|---|
| Cor | mpany Number | 2707869 |
| Compar * F 3 6 3 A 0 1 | ny Name in full | KHANJEA INTERNATIONAL FOCOS LIMITED. |
| Date of this return (See note 1) The information in this return is made up to | | Day Month Year |
| 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. | | Day Month Year |
| Registered Office (See note 3) Show here the address at the date of this return. | | FULTHERGATE INDUSTRIAL, PARK |
| Any change of registered office must be notified on form 287. | Post town County / Region Postcode | BOTTOMGATE, BLACKBURN LANCASHIRE BBI BAE. |
| Principal business (See note 4) Show trade classification for the principal activity o | code number(s) | 8144. |
| If the code number canno give a brief description of | | |
| | | |



COMPANIES HOUSE 24/05/97

Form revised March 1995

When you have completed and signed the form please send it to the Registrar of Companies at:

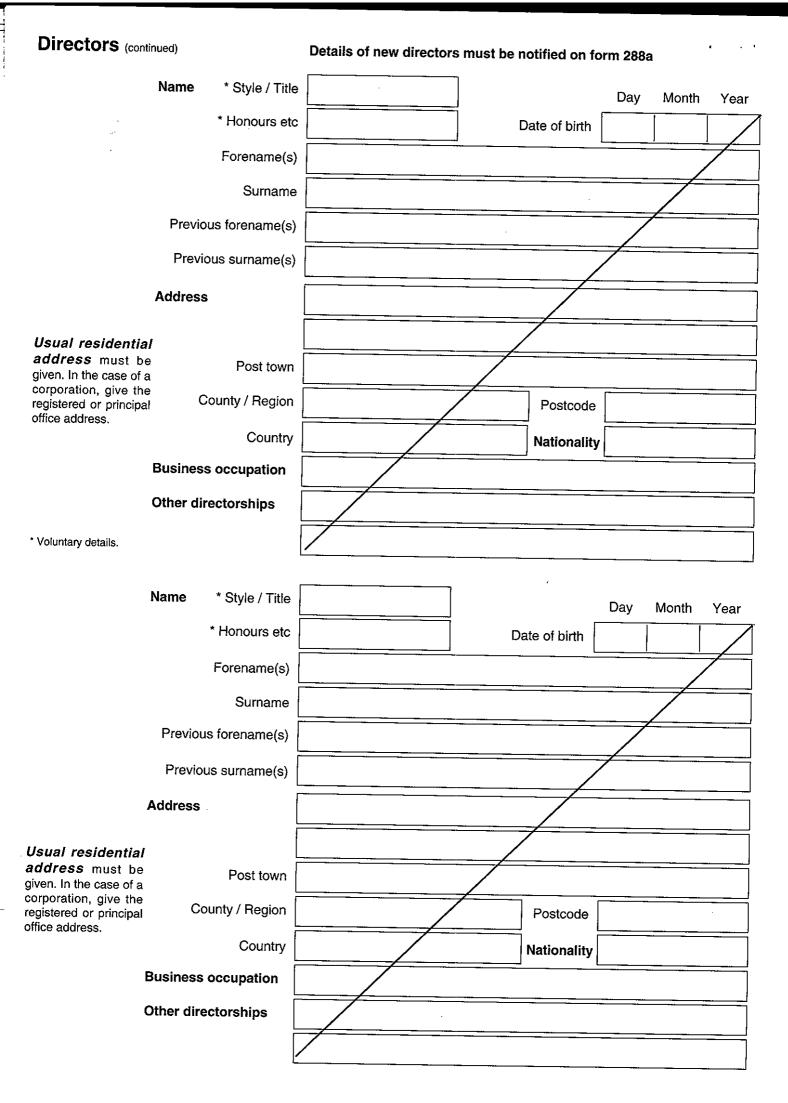
Companies House, Crown Way, Cardiff, CF4 3UZ DX 33050 Cardiff for companies registered in England and Wales

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

Page 1

| Register of members (See note 5) | | CARMOVINE | | | | | |
|---|-------------|------------------|----------------|-----------|---------------|-----------------|--------------------|
| If the register of members is not kept at the registered office, state here where it is kept. | | 6 EAST PAUX LCAD | | | | | |
| | | Post town | DEAST IMULICAD | | | | |
| | _ | | DLACE | burn | | | |
| | | County / Region | LANG | CASHIL | ع | Postcode | BG1 88W. |
| _ | | | | | | | |
| Register of Deb | enture i | holders | <u> </u> | | | _ | |
| (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. | | | | | | | |
| | | Post town | | | | | |
| | С | county / Region | | | | Postcode | |
| | | | | | | _ | |
| Company type | (See note 7 | ว | | | | | |
| Public limited company | y | į | | | | | |
| Private company limite | ed by share | s | 1 | | | | |
| Private company limite share capital | ed by guara | intee without | | | | | |
| Private company limite section 30 | d by share | s exempt under | | PI | ease mark the | e appropriate l | oox |
| Private company limited by guarantee exempt under section 30 | | | | | | | |
| Private unlimited comp | any with sl | nare capital | | | | | |
| Private unlimited comp | any withou | it share capital | | | | | |
| Company Secre | tary (see | notes 1-5) | Details of a | new compa | ny secretary | / must be noti | fied on form 288a. |
| (Please photocopy this area to provide details of joint | Name | * Style / Title | | | *1 | Honours etc | |
| secretaries). | | Forename(s) | 70 | NUS | | | |
| | | Surname | D | <u> </u> | | | |
| * Voluntary details. | Previou | s forename(s) | | | | | |
| Previous surname(s) | | | | | | | |
| Address | | 69 ALTON STREET | | | | | |
| Usual residential | | . [| | | | | |
| address must be given. In the case of a | | Post town | Bea | echoer | 3 | ` | |
| corporation, give the registered or principal | Co | ounty / Region | | JCACITY | | Postcode | BBI 74J. |
| office address. | | Country | | 1/2010 | | | |

| Directors (see notes Please list directors in all | | | etails of new directors | must be not | ified on fo | m 288a | | | | | |
|---|---------|-----------------|-------------------------|---|--------------|--------|----------|----------|--|--|--|
| | iame | * Style / Title | | | | Day | Month | Year | | | |
| | | * Honours etc | | Da | te of birth | 06 | 12_ | 56. | | | |
| | | Forename(s) | 70200 | | | | | | | | |
| | | Surname | PATEL. | | | | | | | | |
| | Previo | ous forename(s) | | | | | | | | | |
| | Previ | ous surname(s) | | | | | | | | | |
| , | Addres | s | 69 ALTO | m Sile | 5ET | | | | | | |
| Usual residential | | | | | | | | | | | |
| address must be given. In the case of a | | Post town | brackbuen | 2 | | | | | | | |
| corporation, give the registered or principal office address. | , | County / Region | Lancasmi | LANCASTRE Postco ENGLANO. National | | | 17L | 5 | | | |
| omos dadiosos. | | Country | ENGLANO. | | | | end | <u>+</u> | | | |
| | Busine | ss occupation | WHOLESALEL. | | | | | | | | |
| (| Other o | lirectorships | NOWE. | | | | | | | | |
| * Voluntary details. | | | | | | | | | | | |
| | | L. | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | | | | |
| | Name | * Style / Title | | | | Day | Month | Year | | | |
| | | * Honours etc | | D | ate of birth | | | <u> </u> | | | |
| | | Forename(s) | 7AKUB ABWUA | | | | | | | | |
| Surname | | | Umelti | | | | | | | | |
| Previous forename(s) | | · | | | | | | | | | |
| Previous surname(s) | | | | | | | | | | | |
| | Addre | ss · | 49 OSWALD STREET | | | | | | | | |
| Usual residential | 1 | | | | | | | _ | | | |
| address must be given. In the case of a | : | Post town | BLACKER | N | | | | | | | |
| corporation, give the registered or principa | | County / Region | | | | e BE | BBI Fet. | | | | |
| office address. | | Country | | | | LITICH | t . | | | | |
| | Busin | ess occupation | WHOLE | | <u></u> | | | | | | |
| | Other | directorships | NONE | | | | | | | | |
| | | | | | | | | | | | |



| 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 | | | | | | | |
| | Previous 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 | County / Region | Postcode | | | | | | |
| office address. | Country | Nationality | | | | | | |
| ! | Business occupation | | | | | | | |
| | Other directorships | | | | | | | |
| * Voluntary details | | | | | | | | |
| | | | | | | | | |
| | Name * Style / Title | | | | | | | |
| | * Honours etc | | | | | | | |
| | Forename(s) | | | | | | | |
| | Surname | | | | | | | |
| | Previous forename(s) | | | | | | | |
| | Previous surname(s) | | | | | | | |
| | Address | | | | | | | |
| Usual residential | | | | | | | | |
| address must be given. In the case of a corporation, give the registered or principal office address. | , 00:1011 | | | | | | | |
| | County / Region | | | | | | | |
| | Country | | | | | | | |
| | Business occupation | | | | | | | |
| | Other directorships | | | | | | | |
| | | | | | | | | |

Class Number of Aggregate (e.g. Ordinary/Preference) shares issued Nominal Value Issued share capital (see note 9) (i.e Number of shares issued Enter details of all the shares in issue multiplied by nominal value at the date of this return. per share) OLDINALT Totals List of past and present members There were no changes in the period (Use attached schedule where appropriate) A full list is required if one was not included with either of the last two returns. in another format on paper (see note 10) A list of changes is enclosed A full list of members is enclosed **Elective resolutions** If at the date of this return an election is in force to dispense with (Private companies only) annual general meetings, mark this box (See note 11) If at the date of this return an election is in force to dispense with laying accounts in general meetings, mark this box Certificate I certify that the information given in this return is true to the best of my knowledge and belief. Signed Date [†] Please delete as appropriate. † a director//secretary When you have signed the return send it This return includes continuation sheets. No with the fee to the Registrar of Companies. Cheques should be made payable to (enter number) Companies House. Please give the name, address, PORTER MATTHEWS & MARSDEN -Me. A. Keen telephone number, and if available, Chartered Accountants a DX number and Exchange, for Oakmount the person Companies House should 6 East Park Road contact if there is any query. Tel 01254 67431. Blackburn 1838 h86 Wer DX exchange

List of past and present members Schedule to form 363a, 363b

Number of shares or amount of stock held by existing members at date of this return. Particulars of shares or stock transferred since the date of the last return or stock (or in the case of the first return, since the incorporation of the company) by

- (a) persons who are still members, and
- (b) persons who have ceased to be members.

| Name and address | Number or amount currently held | Number or amount transferred | Date of registration of transfer | Remarks |
|------------------|---------------------------------|------------------------------|----------------------------------|---------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |



Please complete in typescript, or in bold black capitals.

List of past and present members Schedule to form 363a, 363b

| Compa | any i | Nur | nber |
|---------|-------|-------|--------|
| Company | Nam | ıe ir | ı full |

2707861.

Number of shares

Particulars of shares or stock transferred since

or amount of the date of the last return (or in the case of the

or amount of stock held by existing members at date of this return.

the date of the last return (or in the case of the first return, since the incorporation of the company) by

- (a) persons who are still members, and
- (b) persons who have ceased to be members.

| Name and address | Number or amount currently held | Number or amount Transferred | Date of registration of transfer | Remarks |
|-------------------------------|---------------------------------|------------------------------------|----------------------------------|---------|
| TAKUB ABDOLLA PATEL. | | | | |
| -As PER DIRECTCHISHIP- | | 1 | | |
| | | | | |
| | | | | |
| TUNUS PATERAs her Directorant | | | | |
| -As her Directorang- | | | | |
| | | | | |
| | | | | |
| | | | | |
| TOTAL | 2_ | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |