



**Notice of Individual Person
with Significant Control**

Company Name: **CITY DERMATOLOGY LTD**

Company Number: **11409769**



Received for filing in Electronic Format on the: **10/08/2023**

XC9L3CDE

Notification Details

Date that person became **10/08/2023**
registrable:

Name: **DR FAISAL REHMAN ALI**

Service address recorded as Company's registered office

Country/State Usually **ENGLAND**
Resident:

Date of Birth: ****/05/1983**

Nationality: **BRITISH**

Nature of control

The person holds, directly or indirectly, 75% or more of the shares in the company.

The person has the right, directly or indirectly, to appoint or remove a majority of the board of directors of the company.

The person holds, directly or indirectly, 75% or more of the voting rights in the company.

Register entry date

Register entry date **10/08/2023**

Authorisation

Authenticated

This form was authorised by one of the following:

Director, Secretary, Person Authorised, Administrator, Administrative Receiver, Receiver, Receiver manager, Charity Commission Receiver and Manager, CIC Manager, Judicial Factor