

600

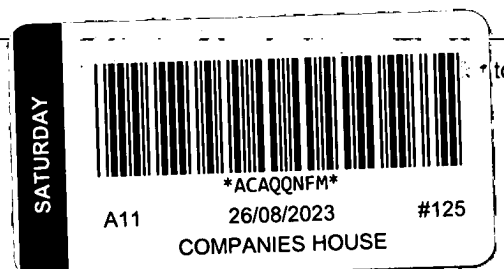


Companies House

1

In accordance with  
section 109 of the  
Insolvency Act 1986

## Notice of appointment of liquidator in a members' or creditors' voluntary winding up



1

### Company details

Company number

0 6 9 5 9 7 7 0

Company name in full

NEW FABRIC SHOPS LIMITED

Filling in this form

Please complete in typescript or in  
bold black capitals.

2

### Liquidator's name

Full forename(s)

UMANG

Surname

PATEL

3

### Liquidator's address

Building name/number

NEUM INSOLVENCY

Street

SUITE 9, AMBA HOUSE

15 COLLEGE ROAD

Post town

HARROW

County/Region

MIDDLESEX

Postcode

H A 1 1 B A

Country

UNITED KINGDOM

4

### Liquidator's email address or telephone number

Email address

UMANG@NEUMINSOLVENCY.CO.UK

Telephone number

020 3411 9598

You must give an email address or  
telephone number. All information  
on this form will appear on the  
public record.

5

### Insolvency practitioner number

Number

1 8 7 9 0

600

Notice of appointment of liquidator in a members' or  
creditors' voluntary winding up

**6 Liquidator's name ●**

Full forename(s)

Surname

**① Other Liquidator's details**

Use this section to tell us  
about another liquidator.

**7 Liquidator's address ●**

Building name/number

Street

Post town

County/Region

Postcode

Country

**② Other Liquidator's details** Use  
this section to tell us about  
another liquidator. Use the  
continuation page to tell us  
about more than two liquidators.

**8 Liquidator's email address or telephone number**

Email address

Telephone number

**③** You must give an email address or  
telephone number. All information  
on this form will appear on the  
public record.

**9 Insolvency practitioner number**

Number

**10 Statement of appointment**

I confirm the appointment of the liquidator(s) on

Date

d	d	M	m	y	y	y	y
2	4	0	8	2	0	2	3

**11 Appointment details**

The appointment was made by  
(Tick one)

- ☐ Company  
☒ Creditors

**Type of liquidation**

Tick to confirm the liquidation type

- ☐ Members  
☒ Creditors

**13 Sign and date**

Liquidator's signature

Signature

X

*Gater*

X

Signature date

d	d	m	m	y	y	y	y
2	5	0	8	2	0	2	3

Notice of appointment of liquidator in a members' or  
creditors' voluntary winding up**Presenter information**

You do not have to give any contact information, but if you do it will help Companies House if there is a query on the form. The contact information you give will be visible to searchers of the public record.

Contact name	Corina Mihaila
Company name	Neum Insolvency
Address	Suite 9
	Amba House
	15 College Road
Post town	Harrow
County/Region	Middlesex
Postcode	H A I I B A
Country	United Kingdom
DX	
Telephone	020 3411 9598

**Checklist**

**We may return forms completed incorrectly or with information missing.**

**Please make sure you have remembered the following:**

- ☒ The company name and number match the information held on the Public Register.
- ☒ You have signed and dated the form.

**Important information**

**All information on this form will appear on the public record.**

**Where to send**

**You may return this form to any Companies House address, however for expediency we advise you to return it to the address below:**

The Registrar of Companies,  
Companies House, Crown Way, Cardiff,  
Wales, CF14 3UZ. DX 33050 Cardiff.

**Further information**

For further information please see the guidance notes on the website at [www.gov.uk/companieshouse](http://www.gov.uk/companieshouse) or email [enquiries@companieshouse.gov.uk](mailto:enquiries@companieshouse.gov.uk)

This form is available in an alternative format. Please visit the forms page on the website at [www.gov.uk/companieshouse](http://www.gov.uk/companieshouse)