

#### **Confirmation Statement**

Company Name: LYNDEN HILL CLINICS LIMITED

Company Number: 02841841

XCBL2UCH

Received for filing in Electronic Format on the: 07/09/2023

Company Name: LYNDEN HILL CLINICS LIMITED

Company Number: 02841841

Confirmation **03/08/2023** 

Statement date:

Sic Codes: **86101** 

Principal activity Hospital activities

description:

### **Statement of Capital (Share Capital)**

Class of Shares: ORDINARY Number allotted 100000

Currency: GBP Aggregate nominal value: 100000

Prescribed particulars

EACH SHARE IS ENTITLED TO ONE VOTE IN ANY CIRCUMSTANCES. EACH SHARE IS ENTITLED PARI PASSU TO DIVIDEND PAYMENTS OR ANY OTHER DISTRIBUTION.

# **Statement of Capital (Totals)**

Currency: GBP Total number of shares: 100000

Total aggregate nominal value: 100000

Total aggregate amount 0

unpaid:

#### **Full details of Shareholders**

The details below relate to individuals/corporate bodies that were shareholders during the review period or that had ceased to be shareholders since the date of the previous confirmation statement.

Shareholder information for a non-traded company as at the confirmation statement date is shown below

Shareholding 1: 2000 ORDINARY shares held as at the date of this confirmation

statement

Name: DANA FAYSAL ALZEERA

Shareholding 2: 4000 ORDINARY shares held as at the date of this confirmation

statement

Name: JULIANNA EL ZEERAH

Shareholding 3: 4000 ORDINARY shares held as at the date of this confirmation

statement

Name: GERALDINE GABRIEL MCHUGH

Shareholding 4: 90000 ORDINARY shares held as at the date of this confirmation

statement

Name: **HEALTHLINK LIMITED** 

## **Confirmation Statement**

I confirm that all information required to be delivered by the company to the registrar in relation to the confirmation period concerned either has been delivered or is being delivered at the same time as the confirmation statement

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**Electronically filed document for Company Number:** 

# **Authorisation**

Authenticated This form was authorised by one of the Director, Secretary, Person Authorised, Judicial Factor	e following: , Charity Commission Receiver and Manager, CIC Manager,

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**End of Electronically filed document for Company Number:**