



Companies House

# CS01<sub>(ef)</sub>

## Confirmation Statement

Company Name: **LYNDEN HILL CLINICS LIMITED**

Company Number: **02841841**



XB9SGUD5

Received for filing in Electronic Format on the: **05/08/2022**

Company Name: **LYNDEN HILL CLINICS LIMITED**

Company Number: **02841841**

Confirmation Statement date: **03/08/2022**

Sic Codes: **86101**

Principal activity description: **Hospital activities**

## Statement of Capital (Share Capital)

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<b>Class of Shares:</b>	<b>ORDINARY</b>	Number allotted	<b>100000</b>
Currency:	<b>GBP</b>	Aggregate nominal value:	<b>100000</b>

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.**

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## Statement of Capital (Totals)

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Currency:	<b>GBP</b>	Total number of shares:	<b>100000</b>
		Total aggregate nominal value:	<b>100000</b>
		Total aggregate amount	<b>0</b>
		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

# Authorisation

Authenticated

This form was authorised by one of the following:

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