



BLUEPRINT
Company Secretary

Please complete in typescript,
or in bold black capitals.

CHFP055

445187/645

363a

Annual Return

Company Number 106190

Company Name in full LEISURE CASPIAN LIMITED

Date of this return

The information in this return is made up to

| Day | | Month | | Year | | |
|-----|---|-------|---|------|---|---|
| 2 | 1 | 0 | 6 | 2 | 0 | 0 |
| | | | | | | 3 |

Date of next return

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

Show here the address **at the date of
this return.**

*Any change of
registered office
must be notified
on form 287.*

Post town 4 ARLESTON WAY
SHIRLEY
Post town SOLIHULL
County / Region
UK Postcode B90 4LH

Principal business activities

Show trade classification code number(s)
for the principal activity or activities.

9999

If the code number cannot be determined,
give a brief description of principal activity.



A26 COMPANIES HOUSE 0216
A8NE9MT7 21/07/03

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

Companies House, Crown Way, Cardiff, CF14 3UZ DX 33050 Cardiff
for companies registered in England and Wales or

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

Register of members

If the register of members is not kept at the registered office, state here where it is kept.

4 ARLESTON WAY
SHIRLEY
Post town SOLIHULL
County / Region UK Postcode B90 4LH

Register of Debenture holders

If there is a register of debenture holders, or a duplicate of any such register or part of it, which is not kept at the registered office, state here where it is kept.

Post town
County / Region UK Postcode

Company type

Public limited company

Private company limited by shares

Private company limited by guarantee without share capital

Private company limited by shares exempt under section 30

Private company limited by guarantee exempt under section 30

Private unlimited company with share capital

Private unlimited company without share capital

☐
☒
☐
☐
☐
☐
☐

Please tick the appropriate box

Company Secretary

Details of a new company secretary must be notified on form 288a.

(Please photocopy this area to provide details of joint secretaries).

Name

* Style / Title

Forename(s)

* Voluntary details.

Surname

If a partnership give the names and addresses of the partners or the name of the partnership and office address.

Address

Usual residential address

must be given. In the case of a corporation or a Scottish firm, give the registered or principal office address.

Post town SOLIHULL
County / Region UK Postcode B90 4LH
Country England

Directors

Details of new directors must be notified on form 288a.

Please list directors in alphabetical order.

| | | | | |
|----------------------------------|--|--------------------------------|-------------|---------|
| Name | * Style / Title | | | |
| | | Day | Month | Year |
| Directors | In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name. | Date of birth | | |
| | | | | |
| | | Forename(s) | | |
| | | Surname | | |
| | | AFG CORPORATE SERVICES LIMITED | | |
| | | | | |
| Address | | 4 ARLESTON WAY | | |
| | | SHIRLEY | | |
| Usual residential address | must be given. In the case of a corporation or a Scottish firm, give the registered or principal office address. | Post town | SOLIHULL | |
| | | County / Region | UK Postcode | B90 4LH |
| | | Country | Nationality | BRITISH |
| | | England | | |
| Business occupation | | LIMITED COMPANY | | |

* Voluntary details.

| | | | | |
|----------------------------------|--|----------------------|-------------|---------|
| Name | * Style / Title | | | |
| | | Day | Month | Year |
| Directors | In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name. | Date of birth | | |
| | | | | |
| | | Forename(s) | | |
| | | Surname | | |
| | | AFG NOMINEES LIMITED | | |
| | | | | |
| Address | | 4 ARLESTON WAY | | |
| | | SHIRLEY | | |
| Usual residential address | must be given. In the case of a corporation or a Scottish firm, give the registered or principal office address. | Post town | SOLIHULL | |
| | | County / Region | UK Postcode | B90 4LH |
| | | Country | Nationality | BRITISH |
| | | England | | |
| Business occupation | | LIMITED COMPANY | | |

Issued share capital

Enter details of all the shares in issue at the date of this return.

Class
(e.g. Ordinary/Preference)

**Number of
shares issued**

**Aggregate
Nominal Value**

(i.e. Number of shares issued multiplied by nominal value per share, or total amount of stock)

Ordinary Shares

50,000

£50,000.000

Totals

50,000

£50,000.000

List of past and present shareholders

(Use attached schedule where appropriate)

A full list is required if one was not included with either of the last two returns.

There were no changes in the period

☒

on paper in another format

A list of changes is enclosed


☐
☐

A full list of shareholders is enclosed

☐
☐
Certificate

I certify that the information given in this return is true to the best of my knowledge and belief.

Signed



Date

14 JUL 2003

† Please delete as appropriate.

† a ~~director~~ /secretary

When you have signed the return send it with the fee to the Registrar of Companies. Cheques should be made payable to **Companies House.**

This return includes

continuation sheets.

(enter number)

Please give the name, address, telephone number, and if available, a DX number and Exchange, for the person Companies House should contact if there is any query.

The Secretary, Aga Foodservice Group plc, 4 Arleston Way, Shirley,

Solihull, B90 4LH

Tel 0121 711 6000

DX number DX exchange