

Please complete in typescript, or in hold black conitals

Resignation of director or secretary

OF ITT DOIG BIZER	capitais.		-
Company Number		any Number	00892400
Company Name in full			NORTH WEST ACCOUNTNE SERVICES LIMITED
* F 2 8 8	B 0 1	9 X	
Resignation			Day Month Year
form	Date of resignation		9 8 99
	Resignat	ion as director	as secretary Please mark the appropriate box. If resignation is as a director and secretary mark both boxes.
Please insert details as previously notified to Companies Hous	NAME	*Style / Title	MR. *Honours etc
		Forename(s) RONAS BARRIE	
	Surname		PLATT
	9.		Day Month Year
		[†] Date of Birth	19 1 53
If cessation is other than resignation, please state reason			
			A serving director, secretary etc must sign the form below.
* Voluntary details.		Signed	E. J. Shew Date 98/29
† Directors only.			(by a serving director) secretary / administrator / administrative receiver / receiver manager / :=0
Please give the name, address, telephone number and, if available, a DX number and Exchange of the person Companies House should			EDMUND SHEW & CO. Chartered Accountance
		ange of	35 WESTFIELD STREET THE HELD STREET WAID. 190
contact if there is a			Tel 01744 730888
			DX number DX exchange
A32 *AHONNISZ* 9 COMPANIES HOUSE 11/08/99		9/08/99	When you have completed and signed the form please send it to the Registrar of Companies at: Companies House, Crown Way, Cardiff, CF4 3UZ DX 33050 Cartifor companies registered in England and Wales or Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB

for companies registered in Scotland

DX 235 Edinbi