Please complete in typescript, or in bold black capitals.

| C | Н | F | P | n | 1 | F |
|---|---|---|---|---|---|---|

Annual Return CHFP016 01481188 **Company Number** L.B.K. ELECTRONICS LIMITED Company Name in full Day Month Year Date of this return (See note 1) 2 The information in this return is made up to Date of next return (See note 2) If you wish to make your next return Day Month Year 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. Registered Office (See note 3) Show here the address at the date of this return. 14 LONDON STREET Any change of ANDOVER Post town registered office must be notified County / Region HAMPSHIRE on form 287. SP10 2PA Postcode Principal business activities (See note 4) Show trade classification code number(s) 7220 for the principal activity or activities. SOFTWARE CONSULTANCY AND SUPPLY If the code number cannot be determined, give a brief description of principal activity.



Form revised July 1998

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 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 Page 1

| Register of me<br>If the register of me<br>registered office, st   | embers is  | not kept at the where it is kept.             |                          |             |      |               |             | *                            |
|--|--|---|--------------------------|-------------|------|---------------|-------------|------------------------------|
|  | _  | Post town                                     |                          |             |      |               | 7           |                              |
|  | С  | ounty / Region                                | <u> </u>                 | <del></del> |      |               | Postcode    |                              |
| Register of Del  | aonturo  | holdore                                       |                          |             |      |               |             |                              |
| (See note 6) If there is a register  |  |   |                          |             |      |               |             |                              |
| and it is not kept at<br>state here where it   | the regis  |   |                          |             |      |               |             |                              |
|  |  | Post town                                     |                          |             |      |               |             |                              |
|  | C  | ounty / Region                                |                          |             |      |               | Postcode    |                              |
| Company type Public limited company Private company limited to share capital Private company limited to section 30 Private company limited to under section 30 Private unlimited company Private unlimited company Private unlimited company Private unlimited company | by guarantee<br>by shares ex<br>by guarantee<br>by with share<br>by without sh | without empt under exempt capital are capital | X                        | S of a new  |      | ease mark the |             | box<br>otified on form 288a. |
| (Please photocopy this area to provide   | Name   | *Style / Title                                | MRS                      | or a new t  | COMP | 7             |             | ouned on form 288a.          |
| details of joint secretaries).   | Forename(s)  |   | MRS *Honours etc  MIRIAM |             |      |               |             |                              |
|  |  | Surname                                       |                          |             |      |               |             |                              |
| * Voluntary details.   | Previou  | s forename(s)                                 |                          | ·           |      |               |             |                              |
|  | Previo   | us surname(s)                                 |                          |             |      |               | <del></del> |                              |
| Address  |  |   | 17 MANOR CLOSE           |             |      |               |             |                              |
|  |  |   | ABBOT                    | TS ANN      |      |               |             |                              |
| Usual residentia:<br>address must be   | I  | Post town                                     | ANDOV                    | ER          | -    |               |             |                              |
| given. In the case of a corporation, give the registered or principal  | Co   | ounty / Region                                | HAMPS                    | HIRE        |      |               | Postcode    | SP11 7BJ                     |
| office address.  |  | Country                                       | ENGLA                    | ND          |      |               |             |                              |
| Computer Printed by CD Con   | npany Forms 0  | 7000 222123                                   |                          |             |      |               |             | Page 2                       |

Computer Printed by CD Company Forms 07000 222123

| Darcetors (with  |          |                 | Details of new directors must be notified on form 288a |               |               |          |          |             |
|--|----------|-----------------|--|---------------|---------------|----------|----------|-------------|
|  | Name     | *Style / Title  | е  |               |               | Month    | Ye       | ar          |
|  |          | *Honours etc    |  | Date of birth |               |          |          |             |
|  |          | Forename(s)     |  |               |               |          |          |             |
|  |          | Surname         |  |               |               |          |          |             |
|  | Previo   | ous forename(s) |  |               |               |          |          |             |
|  | Previ    | ious surname(s) |  |               |               |          |          |             |
|  | Address  | 5               |  |               |               |          |          |             |
| Usual residential address must be given. In the case of      |          | Post town       |  |               |               |          |          |             |
| corporation, give the registered or princip office address.  | <b>.</b> | County / Region |  | Posto         | code          |          |          | <del></del> |
| Office address.  |          | Country         |  | Natior        | ality         |          |          |             |
|  | Busines  | s occupation    |  |               |               |          |          |             |
|  | Other di | rectorships     |  |               |               |          | ·        |             |
| * Voluntary details.   |          |                 |  |               |               |          |          |             |
|  |          |                 |  |               |               |          |          |             |
|  | Name     | *Style / Title  |  | <u> </u>      | Day           | Month    | Ye       | ar<br>————  |
|  |          | *Honours etc    |  | Date of birth |               |          |          |             |
|  |          | Forename(s)     |  |               | ····          |          |          |             |
|  |          | Surname         |  |               | -             |          |          |             |
|  | Previo   | ous forename(s) |  |               | . :. <u> </u> |          |          |             |
| 4  | Previ    | ous surname(s)  |  |               |               |          |          |             |
|  | Address  | i               |  |               |               |          |          |             |
| Usual residential  |          |                 |  |               | <u> </u>      | <u>-</u> | <u> </u> |             |
| address must be given. In the case of                        | а        | Post town       |  |               |               |          |          |             |
| corporation, give the registered or principa office address. | al (     | County / Region |  | Posto         | ode           |          |          |             |
|  |          | Country         |  | Nation        | ality         |          | -::      |             |
|  | Busines  | s occupation    |  |               |               |          |          |             |
|  | Other di | rectorships     | -  |               |               |          |          |             |
|  |          |                 |  |               |               |          |          |             |

| Directors (conti  | nued)                              | Details of new directors must be notified on form 288a |
|---|------------------------------------|--|
|   | Name *Style / Title                | Day Month Year   |
|   | *Honours etc                       | Date of birth  |
|   | Forename(s)                        |  |
|   | Surname                            |  |
|   | Previous forename(s)               |  |
|   | Previous surname(s)                |  |
|   | Address                            |  |
| Usual residential   |                                    |  |
| address must be given. In the case of                         |                                    |  |
| corporation, give the registered or principal office address. | e<br><sup>al</sup> County / Region | Postcode   |
|   | Country                            | Nationality  |
|   | Business occupation                |  |
|   | Other directorships                |  |
| * Voluntary details.  |                                    |  |
|   |                                    |  |
|   | Name *Style / Title                | Day Month Year   |
|   | *Honours etc                       | Date of birth  |
|   | Forename(s)                        |  |
|   | Surname                            |  |
|   | Previous forename(s)               |  |
|   | Previous surname(s)                |  |
|   | Address                            |  |
| Usual residential   |                                    |  |
| address must be given. In the case of                         | Post town                          |  |
| corporation, give the registered or princip                   |                                    | Postcode   |
| office address.   | Country                            | Nationality  |
|   | Business occupation                |  |
|   | Other directorships                |  |
|   |                                    |  |

Please complete in typescript, or in bold black capitals.

## List of past and present members Schedule to form 363a, 363b

CHFP016

**Company Number** 

01481188

Company Name in full

L.B.K. ELECTRONICS LIMITED

Number of shares or amount of stock held by existing members at date of this return. Particulars of shares or stock transferred since the date of the last return (or in the case of the first return, since the incorporation of the company) by

- (a) persons who are still members, and
- (b) persons who have ceased to be members.

| Name and address   | Number or<br>amount<br>currently held | Number or<br>amount<br>Transferred | Date of<br>registration<br>of transfer | Remarks |
|--|---------------------------------------|------------------------------------|--|---------|
| L B KARTHAUSER<br>17 MANOR CLOSE, ABBOTTS ANN,<br>ANDOVER, HANTS, SP11 7BJ | 99                                    | _                                  | -                                      | Komano  |
| MRS M KARTHAUSER 17 MANOR CLOSE, ABBOTTS ANN, ANDOVER, HANTS, SP11 7BJ     | 1                                     | _                                  | _                                      |         |
|  |                                       |                                    |  |         |
|  |                                       |                                    |  |         |
|  |                                       |                                    |  |         |
|  |                                       |                                    |  |         |
|  |                                       |                                    |  |         |
|  |                                       |                                    |  |         |
|  |                                       |                                    |  |         |

## List of past and present members Schedule to form 363a, 363b

Number of shares or amount of stock held by existing members at date of this return. Particulars of shares or stock transferred since the date of the last return or stock (or in the case of the first return, since the incorporation of the company) by

(a) persons who are still members, and

(b) persons who have ceased to be members.

| Name and address | Number or<br>amount<br>currently held | Number or<br>amount<br>Transferred | Date of registration of transfer | Remarks |
|------------------|---------------------------------------|------------------------------------|----------------------------------|---------|
|                  |                                       |                                    |                                  |         |
|                  |                                       |                                    |                                  |         |
|                  |                                       |                                    |                                  |         |
|                  |                                       |                                    |                                  |         |
|                  |                                       |                                    |                                  |         |
|                  |                                       |                                    |                                  |         |
|                  |                                       |                                    |                                  |         |
|                  |                                       |                                    |                                  |         |
|                  |                                       |                                    |                                  |         |
|                  |                                       |                                    |                                  |         |
|                  |                                       |                                    |                                  |         |
|                  |                                       |                                    |                                  |         |

| Directors (see  | note 8)                        | [       | Details of new directors | must be not | tified on         | form        | 1 288a   |          |     |  |
|---|--------------------------------|---------|--------------------------|-------------|-------------------|-------------|----------|----------|-----|--|
| Please list directors   | in alphabetical order.         |         | MR                       |             |                   |             |          |          |     |  |
|   | Name *Style /                  | Title [ | M                        | ]           | Г                 | Day         | - T      | Ye       |     |  |
|   | *Honours                       | s etc   |                          | Date o      | of birth          | 1   8       | 0 2      | 1   9    | 4 8 |  |
|   | Forenam                        | ne(s)   | LAWRENCE BRYAN           |             | ·                 |             |          |          |     |  |
|   | Surn                           | ame     | KARTHAUSER               |             |                   |             |          |          |     |  |
|   | Previous forenam               | ne(s)   |                          |             |                   |             |          |          |     |  |
|   | Previous surnam                | ne(s)   |                          |             |                   | <del></del> |          |          |     |  |
|   | Address                        |         | 17 MANOR CLOSE           |             |                   |             |          |          |     |  |
| Usual residential   |                                |         | ABBOTTS ANN              |             | .,                |             |          |          |     |  |
| address must be given. In the case of                             |                                | town    | ANDOVER                  |             |                   |             |          |          |     |  |
| corporation, give the<br>registered or princip<br>office address. | e<br><sup>al</sup> County / Re | gion    | HAMPSHIRE                |             | Postco            | de [        | SP11 7BJ |          |     |  |
| ***************************************                           | Соц                            | untry   | ENGLAND                  |             | Nationa           | lity        | BRITISH  |          |     |  |
|   | Business occupati              | ion     | COMPUTER SOFTWARE        | DEVELOPMEN  | T DIRE            | CTOR        |          |          |     |  |
|   | Other directorship             | s [     |                          |             |                   |             |          |          |     |  |
| * Voluntary details.  |                                |         |                          |             |                   |             |          |          |     |  |
|   |                                | •       |                          |             |                   |             |          |          |     |  |
|   | Name *Style /                  | Title   |                          |             |                   | Day         | Month    | Υє       | ear |  |
|   | *Honour                        | s etc   |                          | Date o      | of birth          | 1           |          |          |     |  |
|   | Forenan                        | ne(s)   |                          |             |                   |             |          |          |     |  |
|   | Surn                           | ame     |                          |             |                   |             |          |          |     |  |
|   | Previous forenan               | ne(s)   |                          |             |                   |             |          |          |     |  |
|   | Previous surnan                | ne(s)   |                          |             |                   |             |          |          |     |  |
|   | Address                        |         |                          |             | <u>,</u>          |             |          |          |     |  |
| Usual residentia  | ,                              |         |                          | ,           | <del>, , ,,</del> |             |          |          |     |  |
| address must be given. In the case o                              | Post                           | town    |                          |             |                   |             |          |          |     |  |
| corporation, give the registered or princip                       | e Occuptor / Do                | gion    |                          |             | Postco            | de          |          |          |     |  |
| office address.   | Cor                            | untry   |                          |             | Nationa           | lity        |          |          |     |  |
|   | Business occupat               | ion     |                          |             | · •               |             |          |          |     |  |
|   | Other directorship             | s       |                          |             |                   |             |          | <u> </u> |     |  |
|   | ·                              | ]       |                          |             |                   |             |          |          |     |  |
|   |                                |         | Ī                        |             |                   |             |          |          |     |  |

| Issued share capital (see note 9) Enter details of all the shares in issue at the date of the return.   | Class<br>(e.g. Ordinary/Preference)                             | Number of shares issued                          | Aggregate Nominal Value (i.e. Number of shares issued multiplied by nominal value per share) |
|---|---|--|--|
|   | ORDINARY  | 100  | £100-00  |
|   |   |  |  |
|   | Totals  | 100  | £100-00  |
| List of past and present members (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 i   | n the period                                     |  |
| (see note 10)   | A list of changes is enclo<br>ું<br>A full list of members is લ | <u> </u>   | in another format  |
| Elective resolutions (Private companies only) (See note 11)   | If at the date of this return                                   | an election is in forc<br>annual general meetir  |  |
|   | If at the date of this return laying accoυ                      | an election is in forc<br>ints in general meetir |  |
| Certificate   | I certify that the informati knowledge and belief.              | on given in this return                          | n is true to the best of my  |
| Signed  | BKartha   | nser Dat   | e 25/02/99,  |
| † 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  | (enter number)                                   | ontinuation sheets.  |
| Please give the name, address, telephone number and, if available,  | HYSONS CHARTERED A  | CCOUNTANTS                                       |  |
| a DX number and Exchange of<br>the person Companies House should  | 14 LONDON STREET,   | ANDOVER,   |  |
| contact if there is any query.  | HAMPSHIRE, SP10 2P  | *  | el 01264 323791  |
|   | DX number   | DX exchange                                      |  |