BLUEPRINT OneWorld

363a

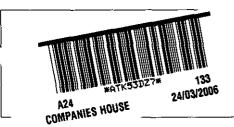
Please complete in typescript, Annual Return or in bold black capitals. **CHFP010 Company Number** 1639144 **Company Name in full** Medisure Corporate Services Limited Day Month Year Date of this return 0 The information in this return is made up Date of next return Day Month Year If you wish to make 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. **Registered Office** 1 Tower Place West, Tower Place Show here the address at the date of this return. Any change of Post town registered office must be notified on form County / Region 287. UK Postcode | EC3R 5BU

Principal business activities

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

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

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I		



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

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

or

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB

for companies registered in Scotland

DX 235 Edinburgh

DX 33050 Cardiff

Register of members If the register of members is not kept at the registered office, state here where it is kept. Post town	1 Tower Place West, Tower Place		
Fost town	London		
County / Region	UK Postcode EC3R 5BU		
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 where it is kept. Post town			
County / Region	UK Postcode		
Company type			
Public limited company			
Private company limited by shares	X		
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).			
* Voluntary details.	Marie Elizabeth		
If a partnership give Surname the names and	EDWARDS		
addresses of the partners or the name of the partnership and office address. Address	108 Peak Hill		
Usual residential address must be Post town	London		
given. In the case of a corporation, County / Region	UK Postcode SE26 4LQ		
give the registered or principal office Country address.	′		

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Directors Please list directors in alphabetical order.		Details of new directors must be notified on form 288a		
N	ame * Style / Title	Mr		
Directors In the case of a director that is a corporate	Date of birth	Day Month Year 0 9 1 0 1 9 5 0		
or a Scottish firm, the name is the	Forename(s)	Michael John		
corporate or firm name.	Surname	GOODWIN		
Address		3 Follyfield, Hankerton		
Usual residential address must be given. In the case				
of a corporation,	Post town	MALMESBURY		
give the registered or principal office address.	County / Region	Wiltshire	UK Postcode SN16 9LA	
address.	Country		Nationality British	
	Business occupation	Chartered Accountant		
* Voluntary details.				
	ame * Style / Title	Mr Day Month Year		
Directors In the case of a director that is a corporate	Date of birth	0 7 0 7 1 9 5 5		
or a Scottish firm, the name is the corporate or firm	Forename(s)	Philip Peter Clinton		
name.	Surname	GREGORY		
Address		3 Ashlyns Park		
Usual residential address must be				
given. In the case of a corporation,	Post town	Cobham		
give the registered or principal office	County / Region	Surrey	UK Postcode KT11 2JY	
address.	Country		Nationality British	
	Business occupation	Finance Director		



Directors Please list directors in alphabetical order.		Details of new directors must be r	notified on form 288a
N	ame * Style / Title	Mr	
	•	Day Month Year	
Directors In the case of a director that is a corporate	Date of birth	0 4 0 8 1 9 4 7	
or a Scottish firm, the name is the	Forename(s)	Max Barrie	
corporate or firm name.	Surname	LEWIS	
A	ddress	The Homestead, Upper Cumbe	erland Walk
Usual residential address must be given. In the case		[
of a corporation,	Post town	TUNBRIDGE WELLS	
give the registered or principal office	County / Region	Kent	UK Postcode TN2 5EH
address.	Country		Nationality British
	Business occupation	Consultant	
* Voluntary details.			
N	ame * Style / Title	L	
Directors In the		Day Month Year	
case of a director that is a corporate	Date of birth		
or a Scottish firm, the name is the	Forename(s)	L	
corporate or firm name.	Surname	L	
Address		L	
Usual residential address must be			
given. In the case of a corporation,	Post town		
give the registered or principal office	County / Region		UK Postcode
address.	Country		Nationality
	Rueinoss occupation		

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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)
CUM REDEEM PREFERENCE		0	€0.00
ORDINARY		748,152	£7,481.52
}]]
	Totals	748,152	7,481.52
List of past and present shareho	olders		
(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 change	es in the period X on pape	r in another format
returns.	A list of changes is en	Ĺ	
Certificate Signe	knowledge and belief.	Date	
† 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 ind	cludes 1 c	ontinuation sheets.
Please give the name, address, telephon number and, if available, a DX number and Exchange of the person Companies House should contact if there is any quer	Tower Place, Lor		rvices Limited,
BLUEPRINT OneWorld	DX number	DX exchange	



UK postcode

List of past and present shareholders Schedule to form 363a

CHFP010	HFP010 Company Number [1639144				
	Company Name in full Medisure Corporate Services Limited				
					<u></u>
		 Changes to shareholders particulars or details of the amount of stock or shares transferred must be completed each year You must provide a "full list" of all the company shareholders on: The company's first annual return following the incorporation; Every third annual return after a full list has been provided List the company shareholders in alphabetical order or provide an index List joint shareholders consecutively 			
			Shares or amount of stock transferred (if appropriate)		
	Shareholders' details		Class and number of shares or amount of stock held	Class and number of shares or amount of stock transferred	Date of registration of transfer
Name The Medi	sure Group Limited		£0.01 ORDINARY		
	Place West, Tower Place United Kingdom	,			
			Shares Held 748,152		
UK postco	de EC3R 5BU				<u> </u>
Name					
Address			,		
UK postco	ode				
Name					
Address					