

Please complete in typescript, or in bold black capitals.



363a

	Annual Return
Company Number	01992347
Company Name in full * F 3 6 3 A 0 1 2 *	SYSTEMS CABLING LIMITED
Date of this return (See note 1) The information in this return is made up to	Day Month Year 13 12 96
Date of next return (See note 2) 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 (See note 3) Show here the address at the date of this return.	98 CROYDON ROAD
Any change of registered office must be notified on form 287. Post town County / Region Postcode	BEDDINGTON SURREY CRO HPE
Principal business activities (See note 4) 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.	COMPUTER CABLING

Compa Form revised March 1900

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

panies House, Crown Way, Cardiff, CF4 3UZ DX 33050 Cardiff ompanies registered in England and Wales

panies House, 37 Castle Terrace, Edinburgh, EH1 2EB companies registered in Scotland DX 235 Edinburgh

If the register of m	embers (See note 5) embers is not kept at the tate here where it is kept.			¿ f			
registered office, s	tate here where it is kept.						
	Post town	•					
	County / Region		Postcode				
Register of De	benture holders						
(See note 6) If there is a regis	ter of debenture holders						
	at the registered office,						
	Post town						
	County / Region		Postcode				
			-				
Company type	: (See note 7)			·			
Public limited compa	ny						
Private company lim	ited by shares						
Private company lim share capital	ited by guarantee without						
Private company limi section 30	ted by shares exempt under	Please mark the appropriate box					
Private company lim under section 30	ited by guarantee exempt						
Private unlimited cor	npany with share capital						
Private unlimited cor	npany without share capital						
Company Seci	retary (see notes 8)	D. Astin. of a mass anomalis	Construction and	**			
(Please photocopy	·	Details of a new company s	·	ified on form 288a.			
this area to provide details of joint secretaries).	Name * Style / Title		*Honours etc				
	Forename(s)	VALERIE BRIZ	DGET				
* · · · · · · · · · · · · · · · · · · ·	Surname	BRUNDLE					
* Voluntary details.	Previous forename(s)						
	Previous surname(s)						
	Address	98 CROYDON	ROAD				
Usual residential address must be	Post town	BE DDING TON	<u></u>				
given. In the case of a corporation, give the registered or principal	County / Region	Surrey	Postcode	CRO HPE			
office address.	Country	UNITED KING	DOM				

Directors (see notes 8	3)	Details of new di	irectors m	ust be no	tified on for	m 288a		
Please list directors in alphabetical order.								
Nan	,				Г	Day	Month	Year
	* Honours etc			Dạ	te of birth	03	08	54
	Forename(s)	MICHAEL JOHN						
	Surname	BRUNDL	E					
Р	revious forename(s)		·					
F	Previous surname(s)							
Ado	iress	98 CR	oddor	J ROA)	>			
Usual residential								
address must be given. In the case of a corporation, give the	Post town	BEDDIN	GTON			·		
registered or principal office address.	County / Region	Surrey			Postcode	CR	0 HPE	-
	Country	UNITED	King;	DOM	Nationality	ationality BRITIS		
Bus	siness occupation	DIRECTO	R		·			
Oth	er directorships				•			
* Voluntary details.								
								
Nar	ne * Style / Title					Day	Month	Year
	* Honours etc			Da	te of birth	8. · · · · · · · · · · · · · · · · · · ·		
	Surname							
Р	revious forename(s)				,			
F								
Ado	dress							
Usual residential								
address must be given. In the case of a	Post town			- Version			7	
corporation, give the registered or principal office address.	County / Region				Postcode			
	Country				Nationality			
Bus	siness occupation							
Oth	<u> </u>							

DIRECTORS (continued)		Details of new direc	ctors must be no	otified on for	m 288a	₹,		
Name * Style /		* Style / Title				Day.	Month	Year
		* Honours etc		D	ate of birth			
		Forename(s)					·	
		Surname						
	Previo	us forename(s)						
	Previo	ous surname(s)					-	
,	Address	:						
Usual residential address must be given. In the case of a corporation, give the registered or principal office address.	; !	Post town County / Region Country			Postcode Nationality			
E	Busines	s occupation			······································			
C	Other di	rectorships						
* Voluntary details.								
1	Name	* Style / Title * Honours etc			ate of birth	Day	Month	Year
		Forename(s)						
	Previo	Surname us forename(s)						
		ous surname(s)				·· - · · · · · · · · · · · · · · · · ·		
	Addres							
	Addies	·S			 			
Usual residential address must be given. In the case of a	} !	Post town						
corporation, give the registered or principal office address.		County / Region			Postcode			
onice address.		Country			Nationality			
E	Busines	s occupation						
C	Other di	rectorships						
						 		

Issued share capital (see note 9) 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)			
	ORDINARY	100	£100			
	Totals	100	£100			
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	There were no changes	in the period				
returns. (see note 10)	A list of changes is enclo	on paper	in another format			
	A full list of members is	enclosed				
Elective resolutions (Private companies only) (See note 11)	If at the date of this return	rn an election is in forc annual general meeti				
	If at the date of this return laying according	rn an election is in forc ounts in general meetii	•			
Certificate	I certify that the informat knowledge and belief.	tion given in this return	is true to the best of my			
Signed	Mile	Dat	e 1 - 4 - 97			
† 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.	inis return include	es No co	ontinuation sheets.			
Please give the name, address, telephone number, and if available,	SIBA AND	, Company				
a DX number and Exchange, for the person Companies House should contact if there is any query.	308 HIG					
, , ,	CRO ING	Tel O(8)	680 7796			

Directors (continue	ed)	Details of new director	ors must be no	tified on for	m 288a		
1	Name * Style / Title				Day	Month	Year
	* Honours etc		Da	ate of birth			:
	Forename(s)						
	Surname						
	Previous forename(s)					:.	
	Previous surname(s)						
Ac	ddress						
	Post town County / Region Country usiness occupation			Postcode Nationality			
Oi	ther directorships						
* Voluntary details							
Na	* Style / Title * Honours etc		Da	ate of birth	Day	Month	Year
	Forename(s)			L	· .	<u> </u>	•
	Surname			· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		
	Previous forename(s)						
	Previous surname(s)						
Ac	ddress						
Usual residential address must be	Post town						
given. In the case of a corporation, give the registered or principal	County / Region			Postcode			
office address.	Country			Nationality			
Ві	usiness occupation						
Ot	ther directorships						

Details of new directors must be notified on form 288a