



C O M P A N I E S H O U S E

This form should be completed in black.

N/M ✓

363_a

Annual Return

AMENDED

Company number

CN 2806163

Company name

MARBLE ARCH MEDICAL EYE CENTRE
LIMITED

Date of this return *(See note 1)*

The information in this return is made up to

Day Month Year
DA 0 1 0 4 9 4
Show date

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.

DB



A17 *AYFKHHX2* 267
COMPANIES HOUSE 05/01/96
COMPANIES HOUSE 15/12/95
COMPANIES HOUSE 12/09/95

Registered Office *(See note 3)*

Show here the address at the date of this return.

RO LONDON HOUSE
SUITE 110, 19 OLD COURT PLACE
Post town KENSINGTON
County/Region LONDON
Postcode W8 4PL.

Principal business activities

(See note 4)

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

PA 8 7 4 3

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

Register of members

(See note 5)

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

RM	
Post town	
County/Region	
Postcode	

Register of Debenture holders

(See note 6)

If there is a register of debenture holders and it is not kept at the registered office, state here where it is kept.

RD	
Post town	
County/Region	
Postcode	

Company type (See note 7)

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.....

T1	<input type="checkbox"/>
T2	<input checked="" type="checkbox"/>
T3	<input type="checkbox"/>
T4	<input type="checkbox"/>
T5	<input type="checkbox"/>
T6	<input type="checkbox"/>
T7	<input type="checkbox"/>

Please mark the appropriate box.

Company Secretary (See note 8)

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

Name *Style/Title

Forenames

Surname

*Honours etc

Previous forenames

Previous surname

Address

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

* Voluntary details

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

CS	DR
ADNAN	
AL KILLIDAR	
AD	16 HIGH DRIVE
NEW MALDEN	
Post town	
County/Region	SURREY
Postcode	KT3 3UG
Country	ENGLAND

Issued share capital (See note 9)

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

Class	Number	Aggregate Nominal Value
ORDINARY	100	£1.00 EACH
Totals	100	100

Please mark the appropriate box(es)

There were no changes in the period ☐

on paper not on paper

A list of changes is enclosed ☐ ☐

A full list of members is enclosed ☒ ☐

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.

(See note 10)

Elective resolutions (See note 11)
(Private companies only)

If an election is in force at the date of this return to dispense with annual general meetings, mark this box ☐

If an election is in force at the date of this return to dispense with laying accounts in general meetings, mark this box ☐

Certificate

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

Signed x K. AL. Saidi

Secretary/Director*
(*delete as appropriate)

Date 31/08/95

This return includes 1 continuation sheets.
(enter number)

To whom should Companies House direct any enquiries about the information shown in this return?

ELIAS ALEXANDER & Co
34 HENDON LANE
FINCHLEY
LONDON Postcode N3 1TT
Telephone 0181 - 363 3379 Extension

When you have signed the return send it with the fee to the Registrar of Companies at

Companies House, Crown Way, Cardiff CF4 3UZ
for companies registered in England and Wales
or

Companies House, 100-102 George Street, Edinburgh EH2 3DJ
for companies registered in Scotland.

Directors (See note 8)
Please list directors in alphabetical order.

Name *Style/Title

Forenames

Surname

*Honours etc

Previous forenames

Previous surname

Address

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

Date of birth

Business occupation

Other directorships

Details of new directors must be notified on form 288.

CD

DR

SALWAN

RASSAM

AD

22 Lincoln Road

Worcester Park

Post town

KINGSTON

County/Region

Surrey

Postcode

Country

ENGLAND

DO

06 0861

Nationality

NA

IRISH

OC

COMPANY DIRECTOR

OD

Name

*Style/Title

Forenames

Surname

*Honours etc

Previous forenames

Previous surname

Address

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

Date of birth

Business occupation

Other directorships

CD

DR

FAIZ

TAPPOUNI

AD

107 SELLOWS ROAD

SWISS COTTAGE

Post town

LONDON

County/Region

Postcode

NW3 3SS

Country

ENGLAND

DO

24 11038

Nationality

NA

IRAQI

OC

COMPANY DIRECTOR

OD

* Voluntary details

Directors (continued)

Name *Style/Title

Forenames

Surname

*Honours etc

Previous forenames

Previous surname

Address

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

Date of birth

Business occupation

Other directorships

CD DR

KHILLION

AL-SAIDI

AD 16 HIGH DRIVE

NEW MALDEN

Post town

County/Region SURREY

Postcode KT3 3UG1

Country ENGLAND

DO 070548Nationality **NA** BRITISH**OC** COMPANY DIRECTOR**OD** MARBLE ARCH MEDICAL CENTRE LTD

Name

*Style/Title

Forenames

Surname

*Honours etc

Previous forenames

Previous surname

Address

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

Date of birth

Business occupation

Other directorships

CD**AD**

Post town

County/Region

Postcode

Country

DONationality **NA****OC****OD**

* Voluntary details

Directors (continued)

Name *Style/Title
Forenames
Surname
*Honours etc
Previous forenames
Previous surname

Address

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

Date of birth
Business occupation
Other directorships

CD	
AD	
Post town	
County/Region	
Postcode	Country
DO	Nationality NA
OC	
OD	

Name *Style/Title
Forenames
Surname
*Honours etc
Previous forenames
Previous surname

Address

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

Date of birth
Business occupation
Other directorships

CD	
AD	
Post town	
County/Region	
Postcode	Country
DO	Nationality NA
OC	
OD	

* Voluntary details

LIST OF PAST AND PRESENT MEMBERS

SCHEDULE TO FORM 363[illegible]

Continued overleaf

LIST OF PAST AND PRESENT MEMBERS (continued)

SCHEDULE TO FORM 363

[illegible]