

**363**<sub>a</sub>
Annual Return

This form should be completed in black.

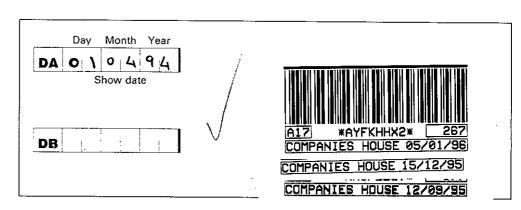
Company number

Company name

cn 280	6163				
MARBLE	ARCH	MEDICAL	EYE	CEN12E	
LIMITED				<del></del>	<u>_</u>

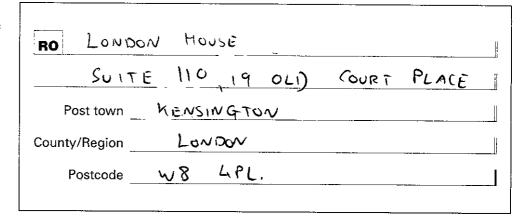
**Date of this return** (See note 1) The information in this return is made up to

**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.



**Registered Office** (See note 3) Show here the address at the date of this return.

Any change of registered office **must** be notified on form 287.



## **Principal business activities**

(See note 4)

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

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

PA 8 7 4 3	

### **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 T2 T3 T4 Please mark the appropriate box. T5 T6 T7

# 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 Da
AONAN
AL KILLIDAR
AD 16 HIGH DRIVE
NEW MALDEN
Post town
County/Region SURREY
Postcode KT3 3UG   Country ENGLAND

<b>Issued share capital</b> (See note 9) Enter details of all the shares in issue at the date of this return.	Class	Number	Aggregate Nominal Value
	ORDINARY_	(00	. El-OO EACH!
	Totals	100	100
List of past and present members (Use attached schedule where appropriate)			Please mark the
A full list is required if one was not included with either of the last two returns,	There were no changes in th	e period	appropriate box(es)
(See note 10)		c	on paper not on paper
	A list of changes is enclosed		
	A full list of members is encl	osed	
Elective resolutions (See note 11) (Private companies only)	If an election is in force at the with annual general meeting:	e date of this retur s, mark this box	n to dispense
	If an election is in force at the with laying accounts in gener		
Certificate I certify that the information given in this return is true to the best of my knowledge and belief.			·
	Signed x K. AL.	· Sadi	Secretary/Director*
,	Date 31 / 08 / 9	)5	(* delete as appropriate)
	This return includes	1	aation sheets.
To whom should Companies House	-	-	
To whom should Companies House direct any enquiries about the information shown in this return?	ELIAS ALEXA	NDER & (	o
mornation shown in this returns	34 HEND	OUN LANE	·
	FINCHLE	<u>1</u> .	
	Londo	$\sim$	Postcode N3 1TT
	Telephone 0181 - 34	3 3379.	Extension
'			
When you have signed the return send it with the fee to the Registrar of	Companies House, Crown W		

Companies at

companies registered in England and Wales

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

Directors  Please list directors	(See note 8) ctors in alphabetical order.	Details of new directors <b>must</b> be notified on form 288.
	. •	
Name	*Style/Title	CD DR
	. Forenames	SALWAN.
	Surname	RASSAM
	*Honours etc	
	Previous forenames	
	Previous surname	
Address	· , ×	AD 22 lincol Road
	tial address must be given.	woncester park
	of a corporation, give the principal office address.	Post town K 148 A N
		County/Region Survey
		Postcode Country ENGLANI)
	Date of birth	DO 0 6 0 8 6 1 Nationality NA 1 RISH
	Business occupation	OC COMPANY DIRECTOR
	Other directorships	OD
Name	*Style/Title	CD DR
	Forenames	FA12
	Surname	
	` *Honours etc	
	Previous forenames	
·	Previous surname	
Address		AD 107 · SELLOWS ROAD
	ntial address must be given.	SWISS COTTAGE
	of a corporation, give the rprincipal office address.	Post town London
	•	County/Region
	<b>\.</b> -	Postcode NW3 335. Country ENGLAND
	Date of birth	DO 24 10 33 Nationality NA 1RAQ1
	Business occupation	OC COMPANY DIRECTOR
	Other directorships	OD
* Voluntary	·	
,		**

Directors (co	ntinued)	
Name	*Style/Title	CD DR
	Forenames	Mhichard
	Surname	AL-SAIDI
	*Honours etc	
	Previous forenames	
	Previous surname	
Address		AD 16 HIGH DRIVE
In the case of a c	ddress must be given. corporation, give the ncipal office address.	Post town  County/Region SURREY
		Postcode KI3.3UG Country ENGLAND
	Date of birth	DO 0 7 0 S 4 8 Nationality NA BRITISH
I	Business occupation	OC COMPANY PIRECTOR
	Other directorships	OD MARBLE ARCH MEDICAL CENTRE LTM
Name	*Style/Title	CD
	Forenames	
	Surname	
	*Honours etc	
	Previous forenames	
	Previous surname	
Address		AD
In the case of a	address must be given. corporation, give the ncipal office address.	Post town  County/Region  Postcode Country
	Date of birth	DO Nationality NA
	Business occupation	oc
	Other directorships	OD
* Voluntary deta	·	

Directors (	continued)	
Name	*Style/Title	CD
	Forenames	
	Surname	
	*Honours etc	
	Previous forenames	
	Previous surname	
Address		AD
In the case of a	al address must be given. a corporation, give the rincipal office address.	Post town
		County/Region
	Date of birth	Postcode Country  Nationality NA
	Business occupation	DO Nationality NA
	Other directorships	ОД
None	<b>*</b>	
Name	*Style/Title	CD
	Forenames	
	Surname	
	*Honours etc Previous forenames	
	Previous surname	
Address	Frevious surname	AD
Usual residentia In the case of a	l address must be given. a corporation, give the rincipal office address.	Post town
		Postcode Country
	Date of birth	DO Nationality NA
	Business occupation	oc
	Other directorships	OD
* Voluntary det	tails	I

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				TO FORM 36
Company Number: 2806163		7	unt of Shares	
COMPANY NAME:  MARBLE ARCH MEDICAL EYE  CENTRE LIMITED	Number of shares or amount of stock held by existing members at date of this return.	since the date or, in the case since the inco company, by (a) persons members (b) persons	who are still s, and	
Name and address		Number	Date of Registration of Transfer	Remarks
X DR S. RASSAM 22 LINCOLN ROUND SUL	rey	26	5/4/93	
DIC F. MAPOUNI - SWISS COTTAGE	•	3c.	1	
DR K. AL SAIDI- NEW MALDEN, SURREY KT3 3U		25	14/12/93	
DR A. AL KILLIDAR - 11	<i>x</i> ·	25	14/12/93	
			1 7/2/1	
		· ·		
		<del></del>		
		<u> </u>		
	- <u>- </u>			
·				
				·
		-		

LIST OF FACT AND THE COLOR		Accou	nt of Shares	
Company Number:	Number of shares or	Particulars of shares transferred since the date of the last return, or, in the case of the first return,		
Company Name:	amount of	f since the inco i company, by (a) persons y	since the incorporation of the company, by	
	date of this return.	(b) persons		
Name and address		Number	Date of Registration of Transfer	Remarks
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