



997

COMPANIES HOUSE

THE REGISTRAR OF COMPANIES COMPANIES HOUSE CROWN WAY

CARDIFT CF4 3U



This form should be completed in black.

The information printed below is taken from Companies House records as at 26/06/99

If this information requires amendment use the spaces opposite.

Date of this return (See note 1)

The information in this return should be made up to a date not later than

Day Month		Year
0 11	0 4	919

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)

This is the address registered by Companies House.

215-217 EDGWARE ROAD LONDON W2 1ES

Principal business activities (See note 4)

Trade classification is 8512 MEDICAL PRACTICE ACTIVITIES

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



Annual Return

of company number 02806163

С

company name

MARBLE ARCH MEDICAL EYE CENTRE LIMITED

company type

PRIVATE COMPANY LIMITED BY SHARES

D 30-4

If you are making the return up to an earlier date, show the date here. Please note that the form must be delivered to Companies House within 28 days of this earlier date.

	Day	WICHTELL	1601
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	Day	Month	Year
_	Day	WICHTELL	1601
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02806163 Register of members (See note 5)	If the information shown needs amendment, give details below and, for secretary and director particulars, the date of any change.
The register is kept at REGISTERED OFFICE Register of debenture holders (See note 6)	
Any register of debenture holders (or duplicate) is kept at	
Company Secretary (See note 7)	
Particulars of a new secretary must be notified on form 288.	Day Month Year Date of any change.
ADNAN AL KILLIDAR 9 BRYAN AVENUE LONDON NW10 2AA	
If this person has ceased to be secretary, please state when.	Day Month Year Date of resignation.
Directors (See note 7)	Day Month Year
Particulars of a new director must be notified on form 288. DR KILLIOD AL SAIDI 9 BRYAN AVENUE LONDON NW10 2AA	Date of any change.
Date of Birth:- 07/05/48 Nat:BRITISH OCC:COMPANY DIRECTOR	
If this person has ceased to be director, please state when.	Day Month Year 1 Date of resignation.
Show any relevant current and previous directorships.	

02806163	If the information shown needs amendment, give details below and the date of any change.
Directors - continued	Day Month Year
Particulars.	Date of any change.
NO MORE DIRECTORS - ADDITIONAL SECRETARIES OR DIRECTORS MUST BE NOTIFIED ON FORM 288a.	
If this person has ceased to be director, please state when.	Day Month Year Date of resignation.
Show any relevant current and previous directorships.	
Particulars.	Day Month Year Date of any change.
NO MORE DIRECTORS — ADDITIONAL SECRETARIES OR DIRECTORS MUST BE NOTIFIED ON FORM 288a.	
If this person has ceased to be director, please state when.	Day Month Year Date of resignation.
Show any relevant current and previous directorships.	
Particulars.	Day Month Year Date of any change.
NO MORE DIRECTORS - ADDITIONAL SECRETARIES OR DIRECTORS MUST BE NOTIFIED ON FORM 288a.	
	Day Manth V
If this person has ceased to be director, please state when.	Day Month Year Date of resignation.
Show any relevant current and previous directorships.	

02806163 Issued Share Capital (See note 8)	Class (eg Ordinary/	Number of shares issued	Aggregate nominal value	
Enter details of all shares in issue at the date of this return.	Preference etc)	•	(ie Number of shares issued multiplied by nominal value per share)	
	ORDINARY	100	£100=	
		-		
	Totals		£100=	
List of past and present members (See note 9)				
(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 in the pe	Please mark the appropriate box.	
The last full members list was at 01/04/97	on paper pa			
	A full list of members is enclosed			
Elective resolutions (See note 10) (Private companies only)				
If an elective resolution is in force at the date of this return to dispense with annual general meetings, mark this box.				
If an elective resolution is in force at the date of this return to dispense with laying accounts in general meetings, mark this box.				
Certificate	Signed 🛧	K.Al. saidi:	Secretary/Director *	
I certify that the information given in this return is true to the best of my knowledge and belief.	Secretary/Directory/Direct			
I enclose the fee of £15.	This return in	cludes 1	continuation sheets	
Cheques should be made payable to Companies House.	This return includes (continuation sheets. (enter number) Please ensure that you have completed all sections on this page.			
	_	· AL- SA	.	
To whom should Companies House direct any enquiries about the information shown in this			AICAL CIR LID	
return?>		了 巨上CrwA6 I Postcode	wa les	
	Telephone <u>(</u>)	1711.77.23.542	ųExt ĮΩ'	

LIST OF PAST AND PRESENT MEMBERS

SCHEDULE TO FORM 363

		SCHEDULE TO FORM 363			
Company Number: 02806163	Account of Shares Particulars of shares trans-		es		
Company Name: MARBLE ARCH MEDICAL EYE CENTRE LIMITED	members at date of this return.	ferred 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			
Name and address	Number currently held	Number Transferred	Date of Registration of Transfer	Remarks	
DR KHILOUD AL-SAIDI 9 BRYAM : AVENUE	•				
9 BRYAM · AVENUE					
LONDON NWIO 2AA	100				
		:			

LIST OF PAST AND PRESENT MEMBERS (continued) SCHEDULE TO FORM 363

LIST OF PAST AND PRESENT WENDERS (CO	minued)		7 10 1011111 000
Company Number: 02806163		Account of Share Particulars of shares trans- ferred since the date of the	:
Company Name:	Number of shares or	last return, or, in the case of the first return, since the	
MARBLE ARCH MEDICAL EYE CENTRE LIMITED	amount of stock held	incorporation of the	
	by existing members at	(a) persons who are still	
	date of this return.	members, and (b) persons who have ceased to be members.	
	Number		
Name and address	currently	Number Date of Registration	Remarks
Name and address	held	Transferred of Transfer	
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