

Please complete in typescript, or in bold black capitals.

CHFP000

363a

Annual Return

Company Number	2 2	834880				
Company Name in full	TOTAL_	INTEGRATED	MANAGE	YENT	EUROPE	
	LTD_					·
						•
Date of this return	Day Mo	onth Year				
The information in this return is made up to	0/9/0	7/2004				
Date of next return					-	
If you wish to make your next return to a date earlier than the anniversary	Day Mo	onth Year				
of this return please show the date here. Companies House will then send a form at the appropriate time.	L L/L	L_/L_ L_ L_ L_				,
Registered Office Show here the address at the date of	MEN	TMORE				
this return.			PoAD			
Any change of Post town	,		(2011)			
registered office must be notified county / Region		-270W)				
on form 287. UK Postcode	CARDI					··
OK 1 GOLGGGG	LCF	<u> 13 2 0 0 </u>				
Principal business activities						
Show trade classification code number(s)						
for the principal activity or activities.	749	34	<u>L.</u>	452	<u> </u>	
	4523	5,	<u> </u>			
If the code number cannot be determined, give a brief description of principal activity.	L					
2 a a						



Form revised September 1999

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

Companies House, Crown Way, Cardiff, CF14 3UZ DX 33050 Cardiff

for companies registered in England and Wales

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

Register of me	mbers	
	embers is not kept at the ate here where it is kept.	
	Post town	
	County / Region	UK Postcode
If there is a registe or a duplicate of a	penture holders or of debenture holders, ny such register or part kept at the registered here it is kept.	
	Post town	L
	County / Region	UK Postcode
Company type		
Public limited compar	ny	
Private company limit	ted by shares	
Private company limit share capital	ted by guarantee without	
Private company limit section 30	ed by shares exempt under	> Please tick the appropriate box
Private company limit under section 30	ted by guarantee exempt	
Private unlimited com	npany with share capital	
Private unlimited com	pany without share capital	
Company Secr	etary	Details of a new company secretary must be notified on form 288a.
(Please photocopy this area to provide details of joint sec-	Name * Style / Title	MR
retaries).	Forename(s)	DAVID NEIL
* Voluntary details.	Curnama	DAVID NEIL
If a partnership give the names and	Surname	LJONES
addresses of the part- ners or the name of the partnership and	Address	MENTMORE,
office address.		LZO, MARSHFIELD ROAD,
Usual residential address must be	, , , , , , , , , , , , , , , , , , , ,	CASTLETON,
given. In the case of a corporation or a	County / (togici)	CARDIFF UK Postcode [CF3 ZUD
Scottish firm, give the registered or prin- cipal office address.		U.K.

Directors		Details of new directors must be notified on form 288a
Please list directors in alpl	habetical order.	
Nam	e * Style / Title	<u> </u>
		Day Month Year
Directors In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.	Date of birth	
	Forename(s)	
	Surname	
Add	Iress	
Usual residential		
address must be given. In the case of a corporation or a Scottish firm, give the registered or principal	Post town	1
	County / Region	UK Postcode
office address.	Country	Nationality
Business occupation		
	,	· L
* Voluntary details.		
Nan	ne * Style / Title	L
		Day Month Year
Directors In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.	Date of birth	L /
	Forename(s)	
	Surname	<u></u>
Add	Iress	
Usual residential		
address must be given. In the case of a		
corporation or a Scottish firm, give the	Post town	
registered or principal office address.	County / Region	UK Postcode
	Country	Nationality

Business occupation

Directors Please list directors in alphabetical order.		Details of new directors must be notified on form 288a			
Name * Style / Title		L MR.			
Directors in the		Day Month Year			
Directors In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.	Date of birth	130/101/1191418.			
	Forename(s)	L DAVID NEIL,			
	Surname	JOINES,			
Address		MENTIMORE,			
Usual residential address must be given. In the case of a		20, MARGHEREUD ROAD			
	Post town	CHARLETON,			
corporation or a Scottish firm, give the registered or principal	County / Region	CARDIFF UK Postcode CF3 200			
office address.	Country	UR_ Nationality BRITISH.			
Busin	ess occupation	L CHARTERED ENGINEER			
* Voluntary details.					
Name	* Style / Title	1 Me			
Directors In the case of a director that		Day Month Year			
is a corporation or a Scottish firm, the name is the corpo- rate or firm name.	Date of birth	65/04/1933			
	Forename(s)	MICHAEL HERBEIT			
	Surname	JOYCE			
Address		6 LINDSAY COURT			
Usual residential address must be given. In the case of a corporation or a Scottish firm, give the registered or principal office address.		LYTHAM			
	Post town	LYTHAM ST ANNES			
	County / Region	LANCASMIRE UK Postcode EY8 25R			
	Country	UK. Nationality BRITIST			

ARCHITECT

Business occupation

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)

	ORDINARY	2	\$2-00	
	Totals		f2-00.	
List of past and present shareholders (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.	on paper in another format A list of changes is enclosed			
	A full list of shareholders	s is enclosed		
Certificate	I certify that the informat knowledge and belief.	tion given in this return is	s true to the best of my	
Signed † Please delete as appropriate.	a director /gecretary	Date	9 July 2001.	
When you have signed the return send is with the fee to the Registrar of Companies Cheques should be made payable to Companies House.	i mis return include	es con	tinuation sheets.	
Please give the name, address, telephone number, and if available, a DX number and Exchange, for the person Companies House should contact if there is any query.		O JOWES ZO, MAKSMFIEL Tel CF3 DX exchange	O ROHD CASTLETON	

Directors		Details of new directors must be notified on form 288a
Please list directors in alph		
Name	e * Style / Title	<u></u>
Directors In the		Day Month Year
case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.	Date of birth	L L /L L L L
	Forename(s)	
	Surname	
Addr	ess	
Usual residential address must be		
given. In the case of a corporation or a	Post town	
Scottish firm, give the registered or principal office address.	County / Region	UK Postcode
	Country	Nationality
Busi	ness occupation	
* Voluntary details.		
Name	* Style / Title	L
Directors In the		Day Month Year
case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.	Date of birth	L L /L L L L
	Forename(s)	·
	Surname	<u> </u>
Address Usual residential		
address must be given. In the case of a		
corporation or a Scottish firm, give the registered or principal office address.	Post town	
	County / Region	UK Postcode
	Country	Nationality
Business occupation		