

288b

Please complete in typescript, or in bold black capitals.

Resignation of director or secretary

	Company Numb	er 3029239
	ompany Name in fu	GABIVIEW LIMITED
Resignation form	Date of resignation	Day Month Year on 10 05 95
Please insert details as previously notified to Companies House	Resignation as direct	or X as secretary Please mark the appropriate box. If resignation is as a director and secretary mark both boxes.
	NAME *Style / Tit	le MISS *Honours etc
	Forename(CLARE ADELE
	Surnam e.	JONES
		Day Month Year
	[†] Date of Bir	th 05 02 69
If cessation is other than resignation, please state reason		n
		A serving director, secretary etc must sign the form below.
	Signe	ed Date
* Voluntary details. † Directors only.		(by a serving director / secretary / administrator / administrative receiver / receiver manager / receiver
telephone number	e name, address, er and, if available,	J BARKER ESQ, EVERSHEDS HEPWORTH & CHADWICK
a DX number and Exchange of the person Companies House should		CLOTH HALL COURT, INFIRMARY STREET, LEEDS
contact if there is		LS1 2JB ^{Tel} 0113 2430391

COMPANIES HOUSE 17/05/95

Form revised March 1995

DX number 12,027 DX exchange LEEDS
When you have completed and signed the form please send it to the Registrar of Companies at:

Companies House, Crown Way, Cardiff, CF4 3UZ DX 33050 Cardiff

for companies registered in England and Wales or

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB

for companies registered in Scotland

DX 235 Edinburgh