

Please complete in typescript, or in bold black capitals.

Form Tovised Water 1995

288b

Resignation of director or secretary

	Company Number	3138064								
F 2 8 8	ompany Name in full B E 1 0	Vin Li	mited							
Resignation form		DayMonth Year								
	Date of resignation	2 2	0 1	9	6					
	Resignation as director	X	X as secretary Please mark the appropriate box. If resignation is as a director and secretary mark both box							
	Name *Style/Title						*Honours e	etc		
Please insert details as previously notified to Companies House.	Forename(s)	First Directors Limited								
	Surname									
	†Date of Birth	Day 0 7	Month 0 8	Y6	ear 9					
If cessati resignatio										
*Voluntary details		A servin	g directo	or se	creta	ary o	etc must sig	n the	form below.	
† Directors only	Signed			/				ate	22/01/96	
	((by a serving	director/se	cretar	//admir	nistra	tor/administrati	ve rece	iver/receiver manager/receiver)	
Please give the n	1st Class Company Services Limited									
telephone numbe a DX number and	72 New Bond Street London W1Y 9DD									
the person Comp- contact if there is	S/12524 Tel 071 495 5145 142									
			DX number 44645 DX exchange MAYFAIR							
		When you have completed and signed the form please send it to the Registrar of Companies at:								
A18 *A	Companion for compa	Companies House, Crown Way, Cardiff, CF4 3UZ DX 33050 Cardiff for companies registered in England and Wales or								
COMPANIES		Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB								

for companies registered in Scotland

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

DX 235 Edinburgh