



## Appointment of Director

Company Name: **PUMP AID**

Company Number: **03661446**



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XCHNF2CJ

### New Appointment Details

Date of Appointment: **03/05/2023**

Name: **MR PRAMODRAI UNIA**

The company confirms that the person named has consented to act as a director.

Service Address: **2 CHILSWELL ROAD CHILSWELL ROAD  
OXFORD  
ENGLAND  
OX1 4PJ**

Country/State Usually Resident: **ENGLAND**

Date of Birth: **\*\*/04/1953**

Nationality: **BRITISH**

Occupation: **TRUSTEE**

## **Authorisation**

### **Authenticated**

**This form was authorised by one of the following:**

**Director, Secretary, Person Authorised, Administrator, Administrative Receiver, Receiver, Receiver manager, Charity Commission Receiver and Manager, CIC Manager, Judicial Factor**