

# G

CHFP080

FORM No. 600

## Notice of appointment of liquidator Voluntary winding up (Members or Creditors)

# 600

Please do not  
Write in this margin

Please complete  
legibly  
preferably

in black type or  
bold block

lettering

\*Insert full name  
of company

Pursuant to section 109 of the Insolvency Act 1986

To the Registrar of Companies  
(Address Overleaf)

For official use

Company number

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03878932

Name of Company

**\*ABCOM SERVICES LIMITED**

Nature of Business

**Investigation & Security**

I give notice that I have been appointed Liquidator of the above company on 17 January 2012

The appointment was by Members & Creditors

Type of liquidation Creditors

Name of Liquidator	C Morfakis
Office holder number	009471
Address	Suite 2, 1 <sup>st</sup> Floor Turnpike Gate House Birmingham Road Alcester B49 5JG
Signature	Date 17 January 2012

Name of Liquidator
Office holder number
Address
Signature

Presentor's name and address and  
reference (If any)  
C Morfakis of Axiom Recovery LLP  
Suite 2, 1<sup>st</sup> Floor  
Turnpike Gate House  
Birmingham Road  
Alcester  
B49 5JG

For Official Use  
General Section

Post room

Time Critical Reference

WEDNESDAY



A11

\*A10SIBRL\*

18/01/2012

#51

COMPANIES HOUSE