



## Change of Particulars for Director

Company Name: **MILI HEALTHCARE LIMITED**

Company Number: **04303458**



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### Details Prior to Change

Original name: **MRS OLGA LYTOVSKA**

Date of Birth: **\*\*/04/1971**

### New Details

Date of Change: **01/05/2022**

Country/State Usually  
Resident **LATVIA**

## **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