

, 665/3° 363a

Please complete in typescript, or in bold black capitals.

Annual Return

CHFP010

Company Number

|--|

Company Name in full |

Rhapsody	Unisex	Hair	and	Health	Salon	Limit <u>ed</u>	
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Date	Λf	thic	ratu	IPP
vale	u	uns	retu	

The information in this return is made up

Day	•	Мог	nth		Ye	ar	
1 L	8	0	5	2	0	0	9_

Date of next return

If you wish to make your next return to a date earlier than the anniversary of this return please show the date here. Companies House will then send a form at the appropriate time.

Day	Month	Year
L_	<u>L L </u>	

Registered Office

Show here the address at the date of this return.

Any change of registered office must be notified on form 287.

Post town

County / Region

Northumberland

Berwick upon Tweed

1/3 Sandgate

UK Postcode

TD15 1EW

Principal business activities

Show trade classification code number(s) for the principal activity or activities.

9302		
1	1	

give a brief description of principal activity.

If the code number cannot be determined,





A04 28/05/2009 **COMPANIES HOUSE**

When you have completed and signed the form please send it to the Registrar of Companies at:

Companies House, Crown Way, Cardiff, CF14 3UZ

for companies registered in England and Wales or

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

for companies registered in Scotland DX ED235 Edinburgh 1 or LP-4 Edinburgh 2

DX 33050 Cardiff

Register of memb		At Registered Office
If the register of memb		
registered office, state kept.	nere where it is	
Kept.	Doot town	
	Post town	
	County / Region	UK Postcode
Register of Deber		
If there is a register of		
or a duplicate of any su of it, which is not kept a		
office, state here where		
	Post town	
	County / Region	UK Postcode
Company type		
Company type		<u></u>
Public limited company	/	
De de la	.1.6	
Private company limite	d by shares	X
Private company limite	d by guarantee	
without share capital	4	
Private company limite exempt under section :		> Please tick the appropriate box
Private company limite		
exempt under section		
Private unlimited comp		
capital	,	
Private unlimited comp	any without share	
capital		
Company Secreta * Voluntary details.	ıry	Details of a new company secretary must be notified on form 288a.
(Please photocopy Nar	ne * Style / Title	I Mr
this area to provide details of joint	oi, io / mio	
secretaries).	Forename(s)	Duncan
	C.	
†† Tick the box if the address shown is a	Surname	Anderson
service address for	Address ++	14 The Meadows
the beneficiary of a Confidentiality Order	Addiess [
granted under section 723B of the		
Companies Act 1985.	Post town	Portright upon Myood
Otherwise, give your usual residential	1 031 10411	Berwick upon Tweed
address. In the case	County / Region	Northumberland
of a corporation or Scottish firm, give the		
registered or principal office address.	Country	
If a partnership give the nam	nes and	
addresses of the partners or	the	
name of the partnership and address.	Onice	
addresses of the partners or	the	
address.		

Directors Please list directors i	in alphabetical order.	Details of new directors must be notified on form 288a
* Voluntary details.	Name * Style / Title	Mrs
In the case of a directo	or	Day Month Year
that is a corporation or a Scottish firm, the name is the corporate	Date of birth	2 8 0 1 1 9 6 3
or firm name.	Forename(s)	Sandra Ellen
	Surname	Anderson
†† Tick the box if the address shown is a service address for	Address ++	14 The Meadows
the beneficiary of a Confidentiality Order		I
granted under sectio 723B of the Companies Act 1985. Otherwise, give your	Post town	Berwick upon Tweed
usual residential address. In the case	County / Region	Northumberland UK Postcode TD15 1NY
of a corporation or Scottish firm, give th registered or principal		Nationality British
office address.	Business occupation	Hairdresser
Directors	in alphabetical order.	Details of new directors must be notified on form 288a
* Voluntary details.		
	Name * Style / Title	
In the case of a director that is a corporation or a Scottish firm, the		Day Month Year
name is the corporate or firm name	Date of birth	
	Forename(s)	
A4 T:-1. AL - L	Surname	
†† Tick the box if the address shown is a service address for	Address ††	
the beneficiary of a Confidentiality Order granted under sectio		
723B of the Companies Act 1985.	Post town	
Otherwise, give your usual residential address. In the case	County / Region	UK Postcode
of a corporation or Scottish firm, give th registered or principal		Nationality
office address.	". Pusiness essuration	



Business occupation |

Issue share capita	k	SS	ue	sh	are	ca	pita	ı
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Enter details of all the shares in issue at the date of this return.

Class (e.g. Ordinary/Preference)

Number of shares issued

Aggregate Nominal Value

Company No. 04768314

(i.e. Number of shares issued multiplied by nominal value per share, or total amount of stock)

Ordinary	1		1	£1.00		
Ordinary	L		L			
	[L			
		<u>-</u>				
			L			
	Totals		1	1.00		
Traded public companies A traded public company means a company any of whose shares are shares admitted to trading on a regulated market	Please tick this box if your public company at any tim return					
List of past and present shareholders	Please tick the appropriat	e box below:		in another on paper format		
(use attached schedule where appropriate) Private or non-traded public companies are required to provide a "full list" if one was not	A full list of shareholders for a private or non-traded public company is enclosed. Please complete Schedule A.					
included with either of the last two returns. Traded public companies are required to provide a list of shareholders who held at least 5% of the issued shares of any share class if a list was not provided with either of the last two returns.	A list of shareholders holding at least 5% of the issued shares of any share class for a traded public company is enclosed. Please complete Schedule B.					
	A list containing sharehold	der changes is enclo	sed			
	→ For private or non-t please complete S		nies,			
	→ For traded public complete Schedul					
	There were no shareholde	er changes in this pe	riod			
Certificate	I certify that the information knowledge and belief.	tion given in this re	eturn is tru	e to the best of my		
Signed	Sandra E.	thebasen	Date	21/05/09		
† Please delete as appropriate.	† (director / <u>secretary</u>)					
When you have signed the return send it with the fee to the Registrar of Companies. Make cheques payable to Companies House.	This return inc	ludes 1		tinuation sheets.		
You do not have to give any contact information in the box opposite but if you do, it will help Companies House to contact	Greaves West & A	yre, Chartered	d Accoun	tants ,		
you if there is a query on the form. The contact information that you give will be	1/3 Sandgate, Be	rwick upon Twe	ed, Nor	thumberland,		
visible to searchers of the public record.	TD15 1EW	Tel [(01289) 30	6688			
	DX number	DX exchan	ge ∩R	REF: RHO/LO7/A		





Schedule A for private or non-traded public companies List of past and present shareholders

(Please use a continuation sheet if required)

CHFP010

Company Number | 04768314

Company Name in full

Rhapsody Unisex Hair and Health Salon Limited

This must only be completed by private and public limited companies that have not traded on a regulated market

- Changes to shareholders' particulars or details of the amount of stock or shares transferred must be completed each year
- You must provide a "full list" of all the company shareholders on:
 - The company's first annual return following incorporation
 - Every third annual return after a full list has been provided
- List the company shareholders in alphabetical order to provide an index
- List joint shareholders consecutively

Do not give shareholder address information

	Shares or amount of stock						
		transferred (if appropriate)					
Shareholder's name only	Class and number of shares or amount of stock held	Class and number of shares or amount of stock transferred	Date of registration of transfer				
Name Sandra Ellen Anderson	£1.00 Ordinary						
	Shares Held 1						
Name							
			:				
Name		-					