



Companies House

**AR01** (ef)

**Annual Return**



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X4GLEPRT

*Company Name:* **TF SERVICES LIMITED**

*Company Number:* **04883282**

*Date of this return:* **01/09/2015**

*SIC codes:* **56210**  
**56290**  
**74909**

*Company Type:* **Private company limited by shares**

*Situation of Registered Office:* **16 BROOMFIELD GATE**  
**SLOUGH**  
**BERKSHIRE**  
**UNITED KINGDOM**  
**SL2 1HH**

**Officers of the company**

## *Company Secretary 1*

Type: **Person**  
Full forename(s): **OLUWAKEMI OLAJUMOKE**

Surname: **DERU**

Former names:

Service Address: **16 BROOMFIELD GATE  
SLOUGH  
BERKSHIRE  
ENGLAND  
SL2 1HH**

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## *Company Director 1*

Type: **Person**  
Full forename(s): **MS OLUWAKEMI OLAJUMOKE**

Surname: **DERU**

Former names:

*Service Address recorded as Company's registered office*

Country/State Usually Resident: **ENGLAND**

Date of Birth: **28/04/1971** Nationality: **BRITISH**  
Occupation: **PHARMACOVIGILANCE**

## Statement of Capital (Share Capital)

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<b>Class of shares</b>	<b>ORDINARY</b>	<i>Number allotted</i>	<b>1</b>
		<i>Aggregate nominal value</i>	<b>1</b>
<i>Currency</i>	<b>GBP</b>	<i>Amount paid per share</i>	<b>0</b>
		<i>Amount unpaid per share</i>	<b>0</b>

*Prescribed particulars*

EACH SHARE IS ENTITLED TO ONE VOTE IN ANY CIRCUMSTANCES.

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## Statement of Capital (Totals)

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<i>Currency</i>	<b>GBP</b>	<i>Total number of shares</i>	<b>1</b>
		<i>Total aggregate nominal value</i>	<b>1</b>

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## *Full Details of Shareholders*

The details below relate to individuals / corporate bodies that were shareholders as at 01/09/2015 or that had ceased to be shareholders since the made up date of the previous Annual Return

*A full list of shareholders for the company are shown below*

*Shareholding 1* : **1 ORDINARY shares held as at the date of this return**  
*Name:* **OLUWAKEMI OLAJUMOKE DERU**

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## *Authorisation*

*Authenticated*

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

Director, Secretary, Person Authorised, Charity Commission Receiver and Manager, CIC Manager, Judicial Factor.