

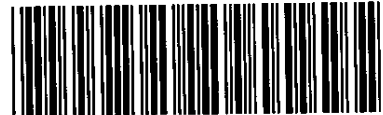
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Notice of appointment of liquidator in a
members' or creditors' voluntary winding up



Companies House

FRIDAY



A23 *A71U FK40* 16/03/2018 #19
COMPANIES HOUSE

1 Company details

Company number 0 5 3 4 7 5 4 8

Company name in full Coralon Limited

→ Filling in this form
Please complete in typescript or in
bold black capitals.

2 Liquidator's name

Full forename(s) Richard Andrew

Surname Segal

3 Liquidator's address

Building name/number Acre House

Street 11-15 William Road

Post town London

County/Region

Postcode N W 1 3 E R

Country

4 Liquidator's email address or telephone number ^①

Email address asegal@hwfisher.co.uk

Telephone number 020 7388 7000

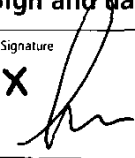
① You must give an email address or
telephone number. All information
on this form will appear on the
public record.

5 Insolvency practitioner number

Number 2 6 8 5

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6	Liquidator's name^①		① Other Liquidator's details Use this section to tell us about another liquidator.
Full forename(s)	Abigail		
Surname	Jones		
7	Liquidator's address^②		② Other Liquidator's details Use this section to tell us about another liquidator. Use the continuation page to tell us about more than two liquidators.
Building name/number	Acre House		
Street	11-15 William Road		
Post town	London		
County/Region			
Postcode	N W 1 3 E R		
Country			
8	Liquidator's email address or telephone number^③		③ You must give an email address or telephone number. All information on this form will appear on the public record.
Email address	Ajones@hwfisher.co.uk		
Telephone number	020 7388 7000		
9	Insolvency practitioner number		
Number	1 0 2 9 0		
10	Statement of appointment		
	I confirm the appointment of the liquidator(s) on		
Date	d 2 6 m 0 1 y 2 0 y 1 8		
11	Appointment details		
	The appointment was made by (Tick one)		
	<input checked="" type="checkbox"/> Company		
	<input type="checkbox"/> Creditors		
12	Type of liquidation		
	Tick to confirm the liquidation type		
	<input checked="" type="checkbox"/> Members		
	<input type="checkbox"/> Creditors		
13	Sign and date		
Liquidator's signature	Signature 		
Signature date	d 2 2 m 0 2 y 2 0 y 1 8		

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**Presenter information**

You do not have to give any contact information, but if you do it will help Companies House if there is a query on the form. The contact information you give will be visible to searchers of the public record.

Contact name	HAWKINS Harry
Company name	Fisher Partners
Address	Acre House
	11-15 William Road
Post town	London
County/Region	
Postcode	N W 1 3 E R
Country	
DX	
Telephone	020 7388 7000

**Checklist**

We may return forms completed incorrectly or with information missing.

Please make sure you have remembered the following:

- ☐ The company name and number match the information held on the public Register.
- ☐ You have signed and dated the form.

**Important information**

All information on this form will appear on the public record.

**Where to send**

You may return this form to any Companies House address, however for expediency we advise you to return it to the address below:

The Registrar of Companies, Companies House,
Crown Way, Cardiff, Wales, CF14 3UZ.
DX 33050 Cardiff.

**Further information**

For further information please see the guidance notes on the website at www.gov.uk/companieshouse or email enquiries@companieshouse.gov.uk

This form is available in an alternative format. Please visit the forms page on the website at www.gov.uk/companieshouse