

363a

Please complete in typescript, or in bold black capitals.

CHFP000

## **Annual Return**

Company Number		5543558		
Company Name in full		ABRAKADABRI LIMITED		
		L		
Dota of this ratum		Day Month Year		
Date of this return The information in this return is made up to		2 3 /0 8 /2 0 0 8		
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_L_/L_/L_L_L_L_		
Registered Office Show here the address at the date of this return.		CARY CHAMBERS		
		1 PALK STREET		
Any change of registered office	Post town	TORQUAY		
<b>must</b> be notified on form 287.	County / Region	DEVON		
	UK Postcode	T Q 2 5 E L		
Principal business	activities			
Show trade classification code number(s)		<b>. 4522</b>		
or the principal activity o	r activities.	4322		
			L	
If the code number cannot be determined, give a brief description of principal activity.		[		
	, p	L		
JESDAY	pe	When you have completed and signed the Registrar of Companies at:  Companies House Crown Way Cardiff		



13/01/2009 176 COMPANIES HOUSE

or

for companies registered in England and Wales Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB DX 235 Edinburgh

for companies registered in Scotland

or LP - 4 Edinburgh 2

Register of mem		1	
	nbers is not kept at the lead to the lead	L	
<b>0</b>	1	L	
	Post town	l	
County / Region			UK Postcode
or a duplicate of any	of debenture holders, y such register or part le ept at the registered	L	
	County / Region		UK Postcode
Company type			
Public limited company			
Private company limite	d by shares	<b>✓</b>	
Private company limited share capital	d by guarantee without		
Private company limited section 30	by shares exempt under	Plea	se tick the appropriate box
Private company limited under section 30	d by guarantee exempt		
Private unlimited comp.	any with share capital		
Private unlimited compa	any without share capital		
Company Secre	tary		,
* Voluntary details.		Details of a new compan	y secretary must be notified on form 288a.
(Please photocopy this area to provide	Name * Style / Title	I	
details of joint secretaries).	Forename(s)	CHRISTINE	
<sup>††</sup> Tick this box if the	Surname	MONTOLOY	
address shown is a service address for the beneficiary of a	Address #	2 IMP DES GRANGES-SOULASSE	
Confidentiality Order granted under section		1	
723B of the Companies Act 1985 otherwise, give your	Post town	63960 VEYRE-MONTON	
usual residential address. In the case of a corporation or	County / Region	UK Postcode	
Scottish firm, give the registered or principal office address.	Country	FRANCE	
If a partnership give the names and addresses of the partners or the name of the partnership and office address.			

Directors		Details of new directors must be notified on form 288a		
Please list directors in alphabetical order.				
	Name * Style / Title	I		
Directors in the case of a director that is a corporation or a		Day Month Year		
Scottish firm, the name is the corporate or firm name.		2 0 10 8 11 9 6 4		
	Forename(s)	BRUNO		
** Tick this box if the address shown is a service address for	Surname	DUBOIS		
the beneficiary of a Confidentiality Order	Address **	2 IMP DES GRANGES-SOULASSE		
granted under section 723B of the Companies Act 1985		L		
otherwise, give your usual residential address. In the case of a corporation or Scottish firm, give the registered or principal office address.	Post town	63960 VEYRE-MONTON		
		UK Postcode		
	Country	FRANCE Nationality FRENCH		
	Business occupation	DIRECTOR		
* Voluntary details.				
	Name * Style / Title	<u>L</u>		
Oirectors In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.		Day Month Year		
	Date of birth	<u>/</u>		
** Tick this box if the	Forename(s)	L		
address shown is a service address for	Surname	L		
the beneficiary of a Confidentiality Order	Address **	L		
granted under section 723B of the				
Companies Act 1985 otherwise, give your usual residential address. In the case of a corporation or Scottish firm, give the registered or principal office address.	Post town			
	County / Region	UK Postcode		
	Country	Nationality		
	Business occupation	1		

Issued	share	capital
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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

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

	ORDINARY	100	100.00 €uros
	L	L	L
		L	L
		L	L
	Totals	100	100.00 €uros
List of past and present shareholders (Use attached schedule where appropriate) A full list is required if one was not included with either of the last two	There were no changes	s in the period	
returns.	A list of changes is encl	on paper	in another format
	A full list of shareholder	s is enclosed	
Certificate	I certify that the informa knowledge and belief.	tion given in this return is	s true to the best of my
Signed  † Please delete as appropriate.	† a director (square)	Date	Dem lest
When you have signed the return send it with the fee to the Registrar of Companies. Cheques should be made payable to <b>Companies House</b> .	This return includ	(enter number)	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 you if there is a query on the form. The contact information that you give will be visible to searchers of the	Ca	TQUAY'S PIONEERS L ary Chambers, 1 Palk Street orquay, TQ2 5EL, England VFax TQ441(0) 1803 88083	et
public record.		mal: tgp⊘btos:::. C-iiDX:exchange	J