FORM No. 600

## Notice of appointment of liquidator Voluntary winding up (Members or Creditors)

**600** 

CHFP080

Please do not Write in this margin

Please complete legibly preferably in black type or bold block lettering

\*Insert full name of company

Pursuant to section 109	of the Insolver	ncy Act 1986			
To the Registrar of Companies (Address Overleaf)			For official use		Company number 05581763
Name of Company					
* ABNDesign Limited T	/A Bryce Aime				
Nature of Business					
Fashion Wholesale					
We give notice that we 12 January 2012  The appointment was I	by Members ar		tors of the abov	ve company	on
Name of Liquidator Office holder number Address	Harold J Sors 5398 Gable House 239 Regents London N3 3LF				
Signature	H			Date 12/01	/2012
Name of Liquidator Office holder number Address  S Davis 9585 Gable House 239 Regents Park Road London N3 3LF					
Signature	Siena Jane			Date 12/01/2012	
Presentor's name and reference (If any) A805	address and	For Official General Sec		Pos	st room

Harold J Sorsky SPW Poppleton & Appleby Gable House 239 Regents Park Road London **N3 3LF Time Critical Reference** 

14/01/2012 COMPANIES HOUSE