

Companies House

-- Jartha mirud ---

Please complete in typescript, or in bold black capitals

288a

DX 235 Edinburgh or LP - 4 Edinburgh 2

## **APPOINTMENT** of director or secretary

(NOT for resignation (use Form 288b) or change of particulars (use Form 288c))

| CHWP000  | •  |   |
|--|--|---|
| MVFOOO   | Company Number                                 | 05680752  |
| C  | ompany Name in full                            | MOVERS SWITTERNATIONAL  |
|  |  | Exole LD.   |
|  | Deta ef  | Day Month Year Day Month Year   |
|  | Date of appointment                            | 21801721018 Birth 217014191710  |
| Appointment<br>form<br>Notes on completion<br>appear on reverse  | <b>1</b> Appointment as director               | as secretary  Please mark the appropriate box. If appointment is as a director and secretary mark both boxes.   |
|  | NAME *Style / Title                            | ML *Honours etc   |
|  |  | SIMOU   |
|  | Surname  | ASLUNCETU   |
|  | Previous<br>Forename(s)                        | Previous Surname(s)   |
| Tick this box if th  |  |   |
| iddress shown is a service address for he beneficiary of a Confidentiality Order granted under the provisions of section (23B of the Companies Act 1985) | address Post town                              |   |
|  |  | Postcode PRZ 60 F   |
|  | County / Region                                | LAKOSINEE Country ENGLANO   |
|  | <sup>†</sup> Nationality                       | BRITISH TBusiness occupation EURS/ES OPERST   |
| †Other directorships   |  |   |
| (additional space overleaf)  |  | I consent to act as ** director / secretary of the above named company  |
| * Voluntary details † Directors only **Delete as appropriate  Signed   |  | 5 ADVAT Date 28 - 07 - 2008   |
|  |  | A director, secretary etc must sign the form below  |
|  |  | Ottobles Date 28.07.08  |
| You do not have to give any contact  |  | (**a director / secretary / administrator / administrative receiver / receiver manager / receiver)              |
| iformation in the  | e box opposite but if you                      |   |
|  |  | Tel   |
| FRIDAY   |  | DX number DX exchange   |
| A30  | *AXHF423C*<br>08/08/2008 94<br>COMPANIES HOUSE | When you have completed and signed the form please send it to the Registrar of Companies at                     |
| A49  | *A2P5M1UN* 4                                   | Companies House, Crown Way, Cardiff, CF14 3UZ DX 33050 Cardiff for companies registered in England and Wales or |
| COI  | MPANIES HOUSE                                  | Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB  |

for companies registered in Scotland

| ,                | Company Number       |  |
|------------------|----------------------|--|
| † Directors only | †Other directorships |  |
|                  |                      |  |
|                  |                      |  |
|                  |                      |  |
|                  |                      |  |

## **NOTES**

Show the full forenames, NOT INITIALS If the director or secretary is a corporation or Scottish firm, show the name on surname line and registered or principal office on the usual residential line

Give previous forenames or surname(s) except

- for a married woman, the name by which she was known before marriage need not be given
- for names not used since the age of 18 or for at least 20 years

A peer or individual known by a title may state the title instead of or in addition to the forenames and sumame and need not give the name by which that person was known before he or she adopted the title or succeeded to it

## Other directorships

Give the name of every company incorporated in Great Britain of which the person concerned is a director or has been a director at any time in the past five years

You may exclude a company which either is, or at all times during the past five years when the person concerned was a director, was

- dormant
- a parent company which wholly owned the company making the return, or
- another wholly owned subsidiary of the same parent company