

Please complete in typescript, or in bold black capitals

(NOT for resignation (use Form 288b) or change

APPOINTMENT of director or secretary

or mr bota black c	apitais	or particulars (use Form 2000))		
CHWP000	Company Number	05888525		
Company Name in full		PHARMIX LIMITED		
Appointment form Notes on completion	Date of appointment Appointment as director NAME *Style / Title		Day Month Year mark the appropriate box if appointment is ador and secretary mark both boxes	
th Tick this box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under the provisions of section 723B of the Companies Act 1985	Forename(s)	RUPINDER		
	Surname Previous Forename(s)	RAICHURA Previous Surname(s)		
	^{††} Usual residential address	27, ANGLESMEADE LAN		
	Post town	PINNER	nde MAS \$ 55	
	County / Region	MID-17 Cour	ntry	
	[†] Nationality	TBusiness occupation	on	
†Other directorship (additional space overlea		I consent to act as ** director / secretary of the	above named company	
* Voluntary details	Consent signature	Dat	e 3NS108	
† Directors only **Delete as appropriate	•	A director, secretary etc must sign the form	n below	
	Signed	Da	30/2/00	
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 public record.		(**a director / secretary / administrator / administrative receiver	/ receiver manager / receiver)	
		Tel		
		DX number DX exchange		

A49 31/05/2008 **COMPANIES HOUSE** When you have completed and signed the form please send it to the Registrar of Companies at

Companies House, Crown Way, Cardiff, CF14 3UZ DX 33050 Cardiff for companies registered in England and Wales OF Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB for companies registered in Scotland DX 235 Edinburgh

or LP - 4 Edinburgh 2