G

CHFP080

Please do not Write in this margin

Please complete legibly preferably in black type or bold block lettering \*Insert full name

of company

**FORM No. 600** 

Notice of appointment of Voluntary winding up (Members or Creditors),

**Time Critical Reference** 

600

Pursuant to section 109 of the Insolvency Act 1986

Fursualit to section 103		1107 7.01 .000			
To the Registrar of Cor (Address Overleaf)	npanies	, 	For official use	Company number	
Name of Company					
* MAGUIRE BROTHER	RS LIMITED				
Nature of Business					
Roofing and external re	efurbishment c	ontractors.			
I give notice that I have	e been appoint	ed liquidator of the	above company on 13	July 2009	
The appointment was I	by: members (	and confirmed by	creditors)		
Type of liquidation. Cre	editors				
Name of Liquidator Office holder number	Amanda Jan 9274	ice Ireland			
Address	Bank Chamb	ers			
	1 Central Avenue				
	Sittingbourne ME10 4AE	;			
Signature			Date 13 Jul	Date 13 July 2009	
			<del></del>		
Presentor's name and reference (If any):	address and	For Official Use			
M4421	•	General Section	Pos	st room	
Amanda Janice Ireland	d .	1	ļ		
Bank Chambers 1 Central Avenue			; ===	n 1011 <b>0 1</b> 11 <b>111</b> 11 1 <b>111</b>	
Sittingbourne					
Kent ME10 4AE				B) 18/18 B)) BB(() 1881	

14/07/2009 COMPANIES HOUSE