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Please complete in typescript, or in bold black capitals.

Annual Return

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CHFP000				
Company number		6164607		
Company name in full		ABSOLUTE GEVELOPMENT		
		SOLUTIONS LIMITED		
Date of this retur The Information in this		Day Month Year Li L610 31 2 の 0 9		
Date of next return If you wish to make your next return to a date earlier than the anniversary of this return please show that date here. Companies House will then send a form at the appropriate time.		Day Month Year		
Registered Office Show here the address this return		Calegr House St. Leonards Close		
Any change of	_ ,,			
registered office must be notified	Post town	BEIDGHORTH		
on form 287	County/Region	SUROPSUIRE		
	UK Postcode	MVII 6 HED		
Principal business activities		7487		
Show trade classification code number(s) for the principal activity or activities				
If the code number cannot be determined, give a brief description of principal activity				
4				





A36 12/05/2009 **COMPANIES HOUSE** When you have completed and signed the form please send it to the Registrar of Companies at: Registrar of Companies at:

Companies House, Crown Way, Cardiff, CF14 3UZ

for companies registered in England or Wales

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB

DX 33050 Cardiff

DX 33050 Cardiff

DX ED235 Edinburgh 1

or LP-4 Edinburgh 2

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Register of members	•
If the register of members is not kept at the	
registered office, state here where it is kept	
-	
Post town	
County/Region	
UK Postcode	
Register of Debenture holders	
If there is a register of debenture holders, or a duplicate of any such register or part of it, which	
is not kept at the registered office, state here	
where it is kept Post town	
County/Region	
UK Postcode	···
OK Postcode	
Company type	
Public limited company	
Private company limited by shares	
Private company limited by guarantee withous hare capital	ut
Private company limited by shares exempt u	nder Please tick the appropriate box
section 30	
Private company limited by guarantee exem under section 30	pt
Private unlimited company with share capita	'
Private unlimited company without share cap	pital
Company Secretary	Details of a new company secretary must be notified on form 288a
* Voluntary details	
(Please photocopy this area to provide Name *Style/Title	
details of joint secretaries). Forename(s)	KATHLEEN ANNE
†† Tick the box if the address shown is a	9083
earling address for the	LICKLANDS ROAM
beneficiary of a Address TT Confidentiality Order	MIGH CANDS READ
granted under section 723B of the Companies	
Act 1985. Otherwise,	
give your usua! Post town residential address. In	SRIDGHIRTH
the case of a corporation or Scottish firm, give the County/Region	SUR OPSHIRE
registered or principal	W [V [1 [6 [5 [8 [4
If a partnership, give the	
names and addresses of Country	
the partners or the name of the partnership and	
office address	
	Page 2

Directors Please list the directors Voluntary details In the case of a	in alphabetical order	Details of new directors must be notified on form 288a
director that is a corporation or a	Name *Sty	le/Title
Scottish firm, the name is the		Day Month Year
corporate or firm name	Date o	of birth 0 510 211 9 7 4
	Foren	ame(s) JOANNE LESLEY
†† Tick the box if the	Su	rname RYE
address shown is a service address for th		ess # CLEMENTINE COTTAGE
beneficiary of a Confidentiality Order granted under section		49 THE WINES
723B of the Companie Act 1985. Otherwise, give your usual	S	town BENTHAU
residential address. In the case of a	County/F	Region SHROPSH (RE
corporation or Scottis firm, give the registere or principal office	h	stcode T F 1 2 5 Q Y
address.	С	ountry
		onality BRITIS#
		pation DIRECTOR
Directors		
Please list the directors Voluntary details	in alphabetical order	Details of new directors must be notified on form 288a
- Voluntary details In the case of a director that is a corporation or a	·	le/Title
- Voluntary details In the case of a director that is a corporation or a Scottish firm, the name is the	Name *Sty	le/Title Day Month Year
 Voluntary details In the case of a director that is a corporation or a Scottish firm, the 	Name *Sty	Day Month Year of birth / /
- Voluntary details in the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm	Name *Sty Date of	Day Month Year of birth / /
Voluntary details In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name	Name *Sty Date of	Day Month Year of birth / /
- Voluntary details In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name †† Tick the box if the address shown is a service address for th beneficiary of a	Name *Sty Date of	Day Month Year of birth / /
- Voluntary details in the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name	Name *Sty Date of Forence Su Addr	Day Month Year of birth / / ame(s)
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ssue share capital 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)	
	LORD'Y	100	1 6100	
			1	
	1			
			<u> </u>	
	Totals	100	Ebo	
raded public companies traded public company means a company any f whose shares are shares admitted to trading n a regulated market	Please tick this box if you public company at any time this return			
List of past and present shareholders use attached schedule where appropriate)	Please tick the appropriate	e box below:	On paper In another format	
Private or non-traded public companies are required to provide a full list" if one was not included with either of the last two returns.	A full list of shareholders for a private or non-traded public company is enclosed. Please complete Schedule A.			
Fraded public companies are required opprovide a list of shareholders who held at least 5% of the issued shares of any share class if a list was not provided with either of the last two	A list of shareholders holding at least 5% of the issued shares of any share class for a traded public company is enclosed. Please complete Schedule B.			
eturns.	A list containing shareholder changes is enclosed			
	→ For private or non- complete Schedu	traded public companies, pl o le A	ease	
	→ For traded public of Schedule B	ompanies, please complete	•	
	There were no sharehold	er changes in this period	V	
ertificate	I certify that the information knowledge and belief	on given in this return is true	to the best of my	
Signed	4 COSPAGE.	Y	Date 11/05/09	
Please delete as appropriate When you have signed the return, send with the fee to the Registrar of companies. Make cheques payable to companies House.	*(director / secretary) This return includes	continuation sheets (enter number)		
You do not have to give any contact of a formation in the box opposite but if ou do, it will help Companies House to contact you if there is a query on the form. The contact information that you ive will be visible to searchers of the	WALLACE CR COLLEGE HOU ST. LEONARD BRIDGNORTH	JSE S CLOSE		
ublic record.		DX exchange		

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 This must only be completed by private and public limited companies that have not traded on a regulated market

Schedule A for private or non-traded public companies List of past and present shareholders

Company number	(Please use a continuation sheet if required)
Company name in full	LABSOLUTE DEVELOPMENT
	LIMITED

- Changes to shareholders' particulars or details of the amount of stock or shares transferred must be completed each year
- > You must provide a "full list" of all company shareholders on:
 - The company's first annual return following incorporation
 - · Every third annual return after a full list has been provided
- List the company shareholders in alphabetical order or provide an index
- > List joint shareholders consecutively

Do not give shareholder address information

	Class and number of	Shares or amount of stock transferred (if appropriate)	
Shareholder's name only	shares or amount of stock held	Class and number of shares or amount of stock transferred	Date of registration of transfer
Name	ORDINARY		
JOANNE L. RYE	100		
Name			
Name			
Name			
Name			
Name			
Name			
Name			
Name			