



Companies House

AR01 (ef)

Annual Return



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Company Name: **ABLE HEALTH CARE LIMITED**

Company Number: **06604185**

Date of this return: **28/05/2014**

SIC codes: **87900**

Company Type: **Private company limited by shares**

Situation of Registered Office: **45 WOLSEY ROAD
NORTHWOOD
MIDDLESEX
HA6 2ER**

Officers of the company

Company Secretary 1

Type: **Person**
Full forename(s): **MRS TEJAL**

Surname: **SHAH**

Former names:

Service Address: **5 CHURCHILL PLACE
HARROW
MIDDLESEX
HA1 1XY**

Company Director **1**

Type: **Person**

Full forename(s): **MRS ARUNA PRAVIN**

Surname: **KUKADIA**

Former names:

Service Address: **45 WOLSEY ROAD
MOOR PARK
NORTHWOOD
MIDDLESEX
HA6 2ER**

Country/State Usually Resident: **UNITED KINGDOM**

Date of Birth: **18/06/1959**

Nationality: **BRITISH**

Occupation: **DIRECTOR**

Statement of Capital (Share Capital)

Class of shares	ORDINARY	<i>Number allotted</i>	2
		<i>Aggregate nominal value</i>	2
<i>Currency</i>	GBP	<i>Amount paid per share</i>	0
		<i>Amount unpaid per share</i>	0

Prescribed particulars

ORDINARY SHARES HAVE FULL RIGHTS IN THE COMPANY WITH REGARDS TO VOTING, DIVIDENDS AND CAPITAL DISTRIBUTION.

Statement of Capital (Totals)

<i>Currency</i>	GBP	<i>Total number of shares</i>	2
		<i>Total aggregate nominal value</i>	2

Full Details of Shareholders

The details below relate to individuals / corporate bodies that were shareholders as at 28/05/2014 or that had ceased to be shareholders since the made up date of the previous Annual Return

A full list of shareholders for the company are shown below

Shareholding 1 : **2 ORDINARY shares held as at the date of this return**
Name: **BOURNE HEALTHCARE LIMITED**

Authorisation

Authenticated

This form was authorised by one of the following:

Director, Secretary, Person Authorised, Charity Commission Receiver and Manager, CIC Manager, Judicial Factor.