CHFP080

FORM No. 600

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

600

Please do not

Write in this margin

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

of company

Pursuant to section 109 of the Insolv	rency Act 1986		
To the Registrar of Companies (Address Overleaf)	For offic	ial use	Company number 06639110
Name of Company			
* A & A Pharmaceuticals (Weedon) I	imited		
Nature of Business			
Dispensing Chemist			
I/We give notice that I/We have been 15 October 2010 The appointment was by Members a Type of liquidation Creditors	**	e above compai	ny on
	Charrie		
Name of Liquidator Gagen Dula Office holder number 009145 Address 257 Hagley Birmingham B16 9NA	Road		
Signature GISNA	nua	Date 18/10)(0
Name of Liquidator Office holder number Address			
Signature		Date	
Presentor's name and address and reference (If any) A747 Gagen Dulari Sharma Sharma & Co	For Official Use General Section	Post ro	oom

257 Hagley Road Birmingham **B16 9NA**

Time Critical Reference



20/10/2010 A01 COMPANIES HOUSE