



Companies House

AR01 (ef)

Annual Return



Received for filing in Electronic Format on the: **25/02/2015**

X41Z552W

Company Name: **STAFFSOLUTIONS CARE AGENCY LTD**

Company Number: **07064136**

Date of this return: **02/11/2014**

SIC codes: **86101**

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

Situation of Registered Office: **319 KINGSWAY PARK
URMSTON
MANCHESTER
M41 7EF**

Officers of the company

Company Secretary 1

Type: **Person**
Full forename(s): **THULANI**

Surname: **GULE**

Former names:

Service Address: **319 KINGSWAY PARK
KINGSWAY PARK
MANCHESTER
UNITED KINGDOM
M41 7EF**

Company Director **1**

Type: **Person**

Full forename(s): **MRS FIKILE FLORENCE**

Surname: **KESWA**

Former names:

Service Address: **319 KINGSWAY PARK
URMSTON
MANCHESTER
UNITED KINGDOM
M41 7EF**

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

Date of Birth: **25/05/1965**

Nationality: **SOUTH AFRICAN**

Occupation: **NURSE**

Statement of Capital (Share Capital)

Class of shares	ORDINARY	<i>Number allotted</i>	100
		<i>Aggregate nominal value</i>	100
<i>Currency</i>	GBP	<i>Amount paid per share</i>	1
		<i>Amount unpaid per share</i>	0

Prescribed particulars

ALL SHARE HOLDERS ARE ENTITLED TO VOTE ON ALL RESOLUTIONS PUT TO THE VOTE DURING GENERAL MEETINGS. ALL SHARES ARE CONSIDERED EQUAL FOR VOTING PURPOSES. EACH SHARE HELD EQUATES TO ONE VOTE.

Statement of Capital (Totals)

<i>Currency</i>	GBP	<i>Total number of shares</i>	100
		<i>Total aggregate nominal value</i>	100

Full Details of Shareholders

The details below relate to individuals / corporate bodies that were shareholders as at 02/11/2014 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 : **10 ORDINARY shares held as at the date of this return**
Name: **LUNGELO KESWA**

Shareholding 2 : **10 ORDINARY shares held as at the date of this return**
Name: **VUYANI KESWA**

Shareholding 3 : **80 ORDINARY shares held as at the date of this return**
Name: **FIKILE FLORENCE KESWA**

Authorisation

Authenticated

This form was authorised by one of the following:

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