



Companies House

CS01_(ef)

Confirmation Statement

Company Name: **E SHERRY LTD**

Company Number: **07213901**



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Company Name: **E SHERRY LTD**

Company Number: **07213901**

Confirmation **06/04/2020**

Statement date:

Sic Codes: **86220**

Principal activity **Specialists medical practice activities**
description:

Statement of Capital (Share Capital)

Class of Shares:	ORDINARY	Number allotted	1
Currency:	GBP	Aggregate nominal value:	1

Prescribed particulars

VOTING RIGHTS - ALL SHARES RANK EQUALLY FOR VOTING PURPOSES. ON A SHOW OF HANDS EACH MEMBER HAS ONE VOTE AND ON A POLL EACH MEMBER HAS ONE VOTE PER SHARE HELD, AS IS MORE PARTICULARLY SET OUT IN THE ARTICLES OF ASSOCIATION. DIVIDEND RIGHTS - DIVIDENDS MAY BE PAID TO THE HOLDERS OF ONE OR MORE CLASSES OF SHARES TO THE EXCLUSION OF THE OTHER(S) OR TO ALL CLASSES OF SHARES, IN EACH CASE AT THE SAME OR DIFFERING RATES, AS DETERMINED BY ORDINARY RESOLUTION OR RESOLUTION OF THE DIRECTORS AND AS IS MORE PARTICULARLY SET OUT IN THE ARTICLES OF ASSOCIATION. RIGHTS TO CAPITAL - EACH SHARE RANKS EQUALLY FOR ANY DISTRIBUTION MADE ON A WINDING UP AS IS MORE PARTICULARLY SET OUT IN THE ARTICLES OF ASSOCIATION. RIGHTS OF REDEMPTION - NO SHARES ARE REDEEMABLE.

Statement of Capital (Totals)

Currency:	GBP	Total number of shares:	1
		Total aggregate nominal value:	1
		Total aggregate amount unpaid:	0

Full details of Shareholders

The details below relate to individuals/corporate bodies that were shareholders during the review period or that had ceased to be shareholders since the date of the previous confirmation statement.

Shareholder information for a non-traded company as at the confirmation statement date is shown below

Shareholding 1:	1 ORDINARY shares held as at the date of this confirmation statement
Name:	EOIN SHERRY

Confirmation Statement

I confirm that all information required to be delivered by the company to the registrar in relation to the confirmation period concerned either has been delivered or is being delivered at the same time as the confirmation statement

Authorisation

Authenticated

This form was authorised by one of the following:

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