



Annual Return

Company Name: **24/7 ASSURED CARE SERVICES LIMITED**

Company Number: **07254413**



Received for filing in Electronic Format on the: **03/08/2016**

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Company Name: **24/7 ASSURED CARE SERVICES LIMITED**

Company Number: **07254413**

Date of this return: **14/05/2016**

Sic Codes: **88990**

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

Situation of **SUITE 112 EMPIRE HOUSE EMPIRE WAY WEMBLEY MIDDLESEX**

Registered Office: **HA9 0EW**

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## Officers of the company

### Company Director 1

Type: **Person**  
Full Forename(s): **CATHYANNA**  
Surname: **SERI**  
Service Address: **recorded as Company's registered office**

Country/State **UNITED KINGDOM**

Usually Resident:

Date of Birth: **\*\*/12/1977**

Nationality: **BRITISH**

Occupation: **NONE**

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### Company Director 2

Type: **Person**  
Full Forename(s): **MR TOHOULLY HUGUES GILBERT**  
Surname: **SERI**  
Service Address: **recorded as Company's registered office**

Country/State **ENGLAND**

Usually Resident:

Date of Birth: **\*\*/02/1968**

Nationality: **BRITISH**

Occupation: **COMPANY  
DIRECTOR**

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# Authorisation

Authenticated

This form was authorised by one of the following:

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

