



Companies House

CS01_(ef)

Confirmation Statement

Company Name: **MEDICAL AND LEGAL ADMIN SERVICES LIMITED**

Company Number: **07295685**



Received for filing in Electronic Format on the: **26/06/2020**

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Company Name: **MEDICAL AND LEGAL ADMIN SERVICES LIMITED**

Company Number: **07295685**

Confirmation **25/06/2020**

Statement date:

Statement of Capital (Share Capital)

Class of Shares:	ORDINARY	Number allotted	150
	A	Aggregate nominal value:	150
Currency:	GBP		

Prescribed particulars

A. TWO VOTES PER SHARE; B. THE RIGHT, AS RESPECTS DIVIDENDS, TO PARTICIPATE IN A DISTRIBUTION; C. THE RIGHT, AS RESPECTS CAPITAL, TO PARTICIPATE IN A DISTRIBUTION {INCLUDING ON WINDING UP; AND D. THE SHARES ARE NOT REDEEMABLE.

Class of Shares:	ORDINARY	Number allotted	50
	B	Aggregate nominal value:	50
Currency:	GBP		

Prescribed particulars

A. ONE VOTE PER SHARE; B. THE RIGHT, AS RESPECTS DIVIDENDS, TO PARTICIPATE IN A DISTRIBUTION; C. THE RIGHT, AS RESPECTS CAPITAL, TO PARTICIPATE IN A DISTRIBUTION (INCLUDING ON WINDING UP; AND D. THE SHARES ARE NOT REDEEMABLE.

Statement of Capital (Totals)

Currency:	GBP	Total number of shares:	200
		Total aggregate nominal value:	200
		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: **150 ORDINARY A shares held as at the date of this confirmation statement**

Name: **HOLDINGS DIRECT LIMITED**

Shareholding 2: **50 ORDINARY B shares held as at the date of this confirmation statement**

Name: **PAIN MEDICINE MEDICOLEGALS LTD**

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