



**Confirmation Statement**

Company Name: **SHIRES MOTORCYCLE ACCESSORIES LIMITED**

Company Number: **07823130**



Received for filing in Electronic Format on the: **28/10/2016**

X5IKLCBM

Company Name: **SHIRES MOTORCYCLE ACCESSORIES LIMITED**

Company Number: **07823130**

Confirmation **25/10/2016**

Statement date:

## Statement of Capital (Share Capital)

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|                         |                 |                          |          |
|-------------------------|-----------------|--------------------------|----------|
| <b>Class of Shares:</b> | <b>ORDINARY</b> | Number allotted          | <b>1</b> |
| Currency:               | <b>GBP</b>      | Aggregate nominal value: | <b>1</b> |

Prescribed particulars

**CLASS OF SHARE: ORDINARY SHARES OF £1 EACH PRESCRIBED PARTICULARS:  
ORDINARY SHARES WITH FULL AND EQUAL RIGHTS TO PARTICIPATE IN VOTING IN ALL  
CIRCUMSTANCES AND IN DIVIDENDS AND CAPITAL DISTRIBUTIONS, WHETHER ON A  
WINDING UP OR OTHERWISE. THE SHARES ARE NOT REDEEMABLE.**

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## Statement of Capital (Totals)

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|           |            |                                   |          |
|-----------|------------|-----------------------------------|----------|
| Currency: | <b>GBP</b> | Total number of shares:           | <b>1</b> |
|           |            | Total aggregate nominal<br>value: | <b>1</b> |
|           |            | Total aggregate amount<br>unpaid: | <b>1</b> |

# Persons with Significant Control (PSC)

## PSC notifications

### Notification Details

Date that person became **25/10/2016**  
registrable:

Name: **MRS SUZANNE DUNNE**

Service Address: **23 BLACKBIRD ROAD  
LEICESTER  
ENGLAND  
LE4 0AH**

Country/State Usually  
Resident: **ENGLAND**

Date of Birth: **\*\*/12/1969**

Nationality: **BRITISH**

### Nature of control

The person has the right to exercise, or actually exercises, significant influence or control over the company.

## **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