



Confirmation Statement

Company Name: **K.R. MEDICAL SERVICES LIMITED**

Company Number: **10168857**



Received for filing in Electronic Format on the: **12/05/2017**

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Company Name: **K.R. MEDICAL SERVICES LIMITED**

Company Number: **10168857**

Confirmation **06/05/2017**

Statement date:

Sic Codes: **86220**

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

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 transferred on 2016-05-08
Name:	0 ORDINARY shares held as at the date of this confirmation statement GRAHAM STEPHENS
Shareholding 2:	10 ORDINARY shares held as at the date of this confirmation statement
Name:	SUSAN BREWER
Shareholding 3:	10 ORDINARY shares held as at the date of this confirmation statement
Name:	ANDREW BREWER

Persons with Significant Control (PSC)

PSC notifications

Notification Details

Date that person became **07/05/2016**
registrable:

Name: **DR ANDREW BREWER**

Service address recorded as Company's registered office

Country/State Usually **ENGLAND**
Resident:

Date of Birth: ****/01/1959**

Nationality: **BRITISH**

Nature of control

The person holds, directly or indirectly, more than 25% but not more than 50% of the shares in the company.

Notification Details

Date that person became **07/05/2016**
registrable:

Name: **MRS CAROL SUSAN BREWER**

Service address recorded as Company's registered office

Country/State Usually **ENGLAND**
Resident:

Date of Birth: ****/11/1960**

Nationality: **BRITISH**

Nature of control

The person holds, directly or indirectly, more than 25% but not more than 50% of the shares in 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