

COMPANIES REGISTRY

Waterfront Plaza
8 Laganbank Road
BELFAST
BT1 3BS



371s

ANNUAL RETURN

Tel: 0845 604 88 88
Fax: 028 9090 5291
Email: info.companiesregistry@detini.gov.uk
Web: www.companiesregistry.detini.gov.uk

Company Number: **NI031807**
Company Name: **MEDICARE (NI) LIMITED**
Company Type: **0 - NI PR LTD SH**
Date: **19/12/2008**

Please mark
appropriate box

There were no changes
in the period

☐

A list of changes is
enclosed

☐

A full list of members is
enclosed

☒

The information printed below is taken from Companies Registry records as at the date shown. If this information requires amendment use the spaces provided. Please read the notes for guidance before completing the return.

DATE OF THIS RETURN (See Note 1)

The information in this return should be made up to a date not later than

08/01/2009

DAY MONTH YEAR

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DATE OF NEXT RETURN

If you wish to make up your next return to a date earlier than the anniversary of this return please show the date here. Companies Registry will then send a form at the appropriate time.

DAY MONTH YEAR

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REGISTERED OFFICE (See Note 3)

This is the address registered by Companies Registry

**44 MONTGOMERY ROAD
BELFAST
BT6 HL**



If the information shown needs amendment, give details below, and for secretary and director particulars, the date of any change.

PRINCIPAL BUSINESS ACTIVITIES
(See Note 4)

~~8227-CHEMISTS & PHOTOGRAPHIC SHOPS~~
9999-DORMANT COMPANY

_____	_____
_____	_____

LOCATION OF REGISTER OF MEMBERS (See Note 5)
This address must be in Northern Ireland

LOCATION OF REGISTER OF DEBENTURE HOLDERS
(See Note 6)
This address must be in Northern Ireland

Particulars of a new director or secretary
must be notified on form 296 (See Note 7)

Company Secretary

**MICHAEL
GUERIN
3 DERAMORE PARK SOUTH
MALONE ROAD
BELFAST
BT9**

If this person has ceased to be a secretary/
director, please state when.

Particulars of a new director or secretary
must be notified on form 296 (See Note 7)

Director

**MICHAEL FRANCIS
GUERIN
3 DERAMORE PARK SOUTH
MALONE ROAD
BELFAST
BT9**

**DATE OF BIRTH: 11/06/1963
NATIONALITY: IRISH
OCCUPATION: PHARMACIST**

If this person has ceased to be a secretary/
director, please state when.

Show any relevant current and previous
directorships.

Director

**CATHERINE ROSE
GUERIN
3 DERAMORE PARK SOUTH
MALONE ROAD
BELFAST
BT9**

**DATE OF BIRTH: 02/07/1962
NATIONALITY: IRISH
OCCUPATION: PHARMACIST**

If this person has ceased to be a secretary/
director, please state when.

Show any relevant current and previous
directorships.

SHARE CAPITAL (See Note 8)

Enter details of all shares in issue at the date of this return.

Nominal Capital 100,000.00
Paid Up Capital 2.00

CLASS NUMBER AGGREGATE
VALUE

ordinary TWO £2

(The above details are those currently held on our records)

TOTALS TWO £2

LIST OF PAST AND PRESENT MEMBERS

(See Note 9)

(Use attached schedule and additional sheets where appropriate) A full list is required if one was not included with either of the last two returns.

ELECTIVE RESOLUTIONS (See Note 10)

(Private companies only)

If an elective resolution is in force at the date of this return to dispense with annual general meetings, mark the box.

☐

If an elective resolution is in force at the date of this return to dispense with laying accounts in general meetings, mark the box.

☐

CERTIFICATE

I certify that the information given in this return is true to the best of my knowledge and belief.

SIGNED

Michael Gerdis

Secretary/Director
(delete as appropriate)

DATE

08.01.09

Cheques should be made payable to the Department of Enterprise, Trade and Investment (DETI)

This return includes
Continuation sheets

To whom should Companies Registry direct any enquiries about the information shown in this return?

MICHAEL GERDIS

MEDICARE HOUSE

44 MONTGOMERY ROAD

BELFAST, BT6 9HL

Tel 028 9070 8800

Ext

SCHEDULE TO FORM 371s

COMPANY NUMBER: NI031807

COMPANY NAME: MEDICARE (NI) LIMITED

LIST OF PAST AND PRESENT MEMBERS

<p><u>PLEASE NOTE</u></p> <p>For Returns dated on or after 1st October 2008 shareholders addresses cannot be accepted. Only shareholders full names should be provided.</p>	Account of Shares			
	Number of shares or amount of stock held by existing members at date of this return	Particulars of shares transferred since date of last return, or, in the case of the first return, since the incorporation of the company, by (a) persons who are still members (b) persons who have ceased to be members		Remarks
SHAREHOLDERS FULL NAME ONLY		Number	Date of registration of transfer	
MAGIR LIMITED	2			No changes in period.

SCHEDULE TO FORM 371s

LIST OF PAST AND PRESENT MEMBERS

[illegible]