This form should black	be completed in	Change of director or secretary or change of particulars
	Company Number	[CN] NI 068678
	Company Name	SCAABO BATHING CARE LTO
Appointment		
(Tum over page for resignation and change of	Date of appointment	DA
	Appointment of director	Please mark the appropriate box  If the appointment is as director and secretary
Show the full forenames NOT INITIALS If the director or secretary is a Corporation or Scottish	ppointment of secretary s,	cs mark both boxes
	Name *Style/Title	
firm, show the name or surname line and registered or principal	Forenames	
office on the usual residential address line	Sumame	
Give previous forenamor sumame except - for a married woman the name before marriage need not bigiven for names not used since the age of 18 for at least 20 years	Previous forenames Previous surname Usual residential or address	AD
	7 n n n n n n n n n n n n n n n n n n n	Country Nationality† NA
• • • • • • • • • • • • • • • • • • • •	/01/2010 315 NIES HOUSE 2n†	ОС
times during the past five years when the person was a director was	" Other directorships†	
<ul> <li>dormant</li> <li>a parent company which wholly owned the company making the return</li> <li>a wholly owned subsidiary of the company making the return</li> </ul>		I consent to act as director/secretary of the above named company
- another wholly owned	<b>Consent Signature</b>	Signed Date

A serving director etc. must also sign the form overleaf

MONDAY

 another wholly owned subsidiary of the same parent company

company
\* Voluntary details † (

† Directors only

Donignation	<u> </u>	
Resignation  (This includes any Date of resignation etc	DR 012 018 2101019	
form of ceasing to hold office e.g. Resignation etc. as director	XD Please mark the appropriate how	
from office)	If change of particulars etc , is as director and .	
Resignation etc as secretary	xs secretary mark both boxes	
Forenames	MICHAEL WILLIAM	
Surname	WALLACE	
Date of birth (directors only)	DO	
l f cessation is other than resignation, please state reason (e g death)		
CHANGE OF PARTICULARS	<u> </u>	
Date of change of particulars	DC	
Complete   this section   Change of particulars as director   in all cases	ZD Please mark the appropriate box	
where particulars Change of particulars as secretary have	ZS If change of particulars etc , is as director and secretary mark both boxes	
changed and then the Forenames (names previously appropriate section Sumame Registry)		
Date of birth (directors only)	DO	
Change of name Forenames   Change of name   Change of n	NN	
Surname		
Change of usual residential address	AD	
[emer new dubress)		
Post town		
County/Region		
Postcode	Country	
Other Change (please specify)		
A serving director / secretary etc must also sign the form below		
ALAN WALLACE ()		
-		
Signature	Signed Date Date	
After signing please return the form to the Registrar of Companies at	(by a serving director / secretary / administrator / administrative ¬ receiver) (Delete as appropriate)	
Waterfront Plaza, 8 Laganbank Road,		
·	AETHUR BOXD + GOMPANY	
To whom should Companies Registry direct any enquiries about the	FRANKLIN HOWE, 12 BRUNSWICK STREET	
information shown on this form?	BELFOST Postcode BT2 FGE	
	Telephone 028 9032 9255 Extension	

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