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-ni.gov.uk

Company Number:

NI070294

Company Name:

A&T Lees Limited

Company Type:

0 - NI PR LTD SH

Date:

07/08/2009

A fu	ull	list	of	members	į
enc	los	sed			

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DATE OF THIS RETURN

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

27/08/2009

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.

REGISTERED OFFICE

This is the address registered by Companies Registry If you wish to change this address please file form 295

UNIT 37A, UPPER DUNMURRY LANE BELFAST BT17 0AJ

DAY	MONTH	YEAR

DAY	MONTH	YEAR
		l

DEPARTMENT OF ENTERPRISE TRADE AND INVESTMENT

14 SEP 2009

POST RECEIVED COMPANIES REGISTRY

LOCATION OF REGISTER OF MEMBERS This address must be in Northern Ireland	
LOCATION OF REGISTER OF DEBENTURE HOLDERS	
This address must be in Northern Ireland	

Appointments / Resignations and Change in Particulars **must** be notified on form 296

Please go to the forms section of our website if you require a continuation page www.companiesregistry-ni.gov.uk

Company Secretary	
Forename Surname Address	TARA LEES 1 LILLE PARK
Post Town County / Region Post Code Country	BELFAST BJIO CIR N IRECAND
Appointments / Resignatio must be notified on form 2	ns and Change in Particulars 96
Current Directors	
Forename Surname Address	TARA LEES 1 LILLE PARK
Post Town County / Region Post Code Country Date of Birth Nationality Occupation Other Directorshi	BELFAST BTIC OLR N TALAND 23/12/71 ps Yes/No
Forename Surname Address	AIDAL LEES 1 LILLE RARK
Post Town County / Region Post Code Country Date of Birth Nationality Occupation Other Directorshi	BELAAST BTIC OLE A. IRELAND 6 1 8 1 1967 ps Yes/No

Current Directors

Surname Address	
Post Town County / Region Post Code Country Date of Birth Nationality Occupation Other Directorshi	ps Yes/No
Forename Surname Address	
Post Town County / Region Post Code Country Date of Birth Nationality Occupation Other Directorshi	ps Yes/No
Forename Surname Address	
Post Town County / Region Post Code Country Date of Birth Nationality	<i>I</i>
Occupation Other Directorshi	ns Yes/No

SHARE CAPITAL (See Not Enter details of all shares in		eturn.	CLASS	NUMBER	AGGREGATE VALUE
Nominal Capital Paid Up Capital	10,000.00 2.00		<u>CRDWARY</u>	2	Ez
(The above details are tho	ose currently held on ou	r records)			
			TOTALS	2	tr
LISTOF PAST AND PRESE (Use attached schedule and appropriate) A full list is req either of the last two returns	d additional sheets where uired if one was not includ	ded with	,		
ELECTIVE RESOLUTIONS (Private companies only) If an elective resolution is in		eturn to dispe	ense with annual ç	general meetin	gs, mark the box.
If an elective resolution is ir mark the box.	n force at the date of this r	eturn to dispe	ense with laying a	ccounts in gen	eral meetings,
CERTIFICATE			*		
I certify that the information true to the best of my know			<i>(</i>		
		SIGNED	Mia Lee	Soor	etary/Director
		DATE	1/9/9		te as appropriate)
Cheques should be made p Department of Enterprise, T Investment (DETI)		This return Continuatio			
To whom should Companie enquiries about the informareturn?			DPS CHAI	PIERED 1	ACCOUNTANTS
			72 51.	COLMAD	S PARK
			NEWRY		
			CO. DOW	1. BT3	4 2BX

Tel _______ Ext ____

SCHEDULE TO FORM 371s

COMPANY NUMBER: NI070294
COMPANY NAME: A&T Lees Limited

LIST OF PAST AND PRESENT MEMBERS

PLEASE NOTE		Account	of Shares	
For Returns dated on or after 1 st October 2008 shareholders addresses cannot be accepted . Only shareholders full names should be provided.	Number of shares or amount of stock held by existing members at date of this return	last return, of the first re incorporation company, to who are sti	by (a) persons Il members (b) to have ceased ters	
SHAREHOLDERS FULL NAME ONLY		Number	Date of registration of transfer	Remarks
AIDAJ LEES	1			
TARA LEES	1			

SCHEDULE TO FORM 371s

LIST OF PAST AND PRESENT MEMBERS

PLEASE NOTE	Account of Shares				
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SHAREHOLDERS FULL NAME ONLY		Number	Date of registration of transfer	Remarks	
		-	,		
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