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Please complete in typescript,
or in bold black capitals.

CHWP000

LLP363

Annual Return of a Limited Liability Partnership

LLP Number Full Name of Limited
Liability Partnership

Date of this return
The information in this return
is made up to

Day	Month	Year
06	07	2009

Date of next return
If you wish to make your next
return on a date earlier than
the anniversary of this return
please show the date here.

Day	Month	Year

Any change of
registered office
must be notified on
Form LLP287.

Registered Office
Show here the address
as at the date of
this return.

Post town County UK
Postcode

Register of
Debenture Holders

If there is a register of
debenture holders, or a
duplicate of any such
register or part of it,
which is not kept at the
registered office, state
here where it is kept

Post town County UK
Postcode

List members on page 2

Certificate As a designated member I certify that the information given in this return is
true to the best of my knowledge and belief.

Signed

Designated Member

Date

When you have signed the return send it
with the fee to the Registrar of Companies.
Cheques should be made payable to
Companies House.

This return includes continuation sheets.
(enter number)

SATURDAY



A32 11/07/2009 215
COMPANIES HOUSE

When you have completed and signed the form please send it to the
Registrar of Companies at:

Companies House, Crown Way, Cardiff, CF14 3UZ

DX 33050 Cardiff

or partnerships registered in England and Wales

or

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB

DX 235 Edinburgh

or partnerships registered in Scotland

or LP - 4 Edinburgh 2

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Members

Please list members in alphabetical order

In the case of a member that is a corporation or a Scottish firm, the name is the corporate or firm name.

†† Tick this box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985 otherwise, give your usual residential address. In the case of a corporation or Scottish firm, give the registered or principal office address.

☐

Details of new members must be notified on form LLP288a

Surname or Corporate Name	ATC NOMINEES INC		
Forename(s)			
Address ††	ARANGO-ORILLAC BUILDING		
	2ND FLOOR, EAST 54TH STREET		
Post town	PANAMA		
County / Region		UK	
		Postcode	
Country	REPUBLIC OF PANAMA	Tick box if designated member	<input checked="" type="checkbox"/>

Member Reference Number * (as advised by Companies House)

Date of Birth

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

* Voluntary information

Members

Please list members in alphabetical order

In the case of a member that is a corporation or a Scottish firm, the name is the corporate or firm name.

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☐

Details of new members must be notified on form LLP288a

Surname or Corporate Name	TRANSOM SA		
Forename(s)			
Address ††	ARANGO-ORILLAC BUILDING		
	2ND FLOOR, EAST 54TH STREET		
Post town	PANAMA		
County / Region		UK	
		Postcode	
Country	REPUBLIC OF PANAMA	Tick box if designated member	<input checked="" type="checkbox"/>

Member Reference Number * (as advised by Companies House)

Date of Birth

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

* Voluntary information

Handwritten signature