

BLUEPRINT

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LLP363**Annual Return of a Limited Liability Partnership**

Please complete in typescript,
or in bold black capitals.

CHFP010

LLP Number

OC326694

Full Name of Limited Liability Partnership

CHEMARCK LLP

Date of this return

The information in this return is made up to

Day Month Year

1 3 0 3 2 0 0 8

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

Registered Office

Show here the address as at the date of this return

38 WIGMORE STREET

Any change of registered office must be notified on form LLP287

Post town

LONDON

County

UK
Postcode W1U 2HA**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* *Handman***Date**

13/03/2008

Designated Member

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 1 continuation sheets

(enter number)

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
for partnerships registered in England and Wales or
Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB
for partnerships registered in Scotland DX 235 Edinburgh or LP - 4
Edinburgh 2

TUESDAY

LD2 18/03/2008 344
COMPANIES HOUSE

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

☐

Surname or
Corporate Name

Forename(s)

Address ††

Post town

County / Region

Country

Details of new members must be notified on form LLP288a

FALLMARCK INC

CAMOSA BUILDING, 15TH FLOOR, SAMUEL LEWIS AVENUE

PO BOX 0831-00830

PANAMA

REPUBLIC OF PANAMA

UK

Postcode

Tick box if designated member ☒

Member Reference Number *(as
advised by Companies House)

Date of Birth

Day	Month	Year

* 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

†† 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

☐

Surname or
Corporate Name

Forename(s)

Address ††

Post town

County / Region

Country

Details of new members must be notified on form LLP288a

VIRTELLA LIMITED

38 WIGMORE STREET

LONDON

United Kingdom

UK

Postcode

W1U 2HA

Tick box if designated member ☒

Member Reference Number *(as
advised by Companies House)

Date of Birth

Day	Month	Year

* Voluntary
Information

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