

Conpanies House

- -- for the record

Please CO or in bold

CHWP00

003904/300

LP363

Annual Return of a Limes

Please complete or in bold black o	in typescrip apitals.	<i>t,</i> •	1	Liability Partnership
CHWP000	LL	P Number	Oc 335110	
		of Limited artnership	ABSON Inter	trade Lip
Date of this return The information in this return is made up to 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.		n in this return	Day Month Year 27022009	
		ake your next e earlier than of this return	Day Month Year	
	_	red Office the address	ENTERPRISE HOUSE,	
	as a	t the date of this return.	82 WHITCHURCH ROAD,	
		Post town		
		County	CARDIFF	Postcode CF14 3LX
		Register of re Holders		
If there is a regist				
debenture holders, duplicate of any s register or part of	such	Post town		
which is not kept a registered office,	it the state	County		UK Postcode
here where it is kep		List members on page 2		
		Certificate	As a designated member I certify that true to the best of my knowledge and	t the information given in this return is belief.
		Signed	beall	Date 27/2/09
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 retain moldess	,
A REAL PROPERTY AND THE PRINCE SHARE SHEET SHEET SHEET			Projector of Companies at:	ee the form present carre in the fire

> 04/03/2009 A49

COMPANIES HOUSE

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Registrar of Companies at:

Companies House, Crown Way, Cardiff, CF14 3UZ for partnerships registered in England and Wales

or

DX 235 Edinburgh

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB for partnerships registered in Scotland

or LP - 4 Edinburgh 2

DX 33050 Cardiff

Please list members	in alphabetical order		
In the case of a member I hat is a		Details of new members must be notified on form LLP288	
corporaz tivn or a	r		
Scottist Irm, the	Surname or Corporate Name	IRELAND & OVERSEAS ACQUISITION LTD.	
name is the corpora zeor firm			
name.	Forename(s)	·	
** Tick #the box if	Address **	1ST FLOOR, YAMRAJ BUILDING	
the add ress shown is a ser wite address			
for the peneficiary		MARKET SQUARE, ROAD TOWN	
of a Cos lidentiality Order or stated under			
section 723B of the	Post town		
Comparnies Act 1985 ot∎newise, give	County / Region	UK	
your us tual residen-	County / Hegion	TORTOLA	
tial add ress. In the case of a corpora-	Country	BRITISH WIRGIN ISLANDS Tick box if designated member	
tion or Sottish		PRILLON WIRGIN TOLAND	
firm, give the regis- tered or principal		The state of the s	
office a cddess.	Σ	المنافع	
	,		
	•	Day Month Year	
	Member Reference		
	Number *(as advised by Companies House)	Date of Birth	
* Voluntary	by Companies House)		
information			
Members			
	in alphabetical order		
In the case of a	•		
member that is a		Details of new members must be notified on form LLP288a	
corporation or a	S 		
Scottish firm, the name is the	Surname or Corporate Name	MILLTOWN CORPORATE SERVICES LTD	
corporate or firm	Forename(s)		
name.	, ,		
ff Tick this box if	Address **	1ST FLOOR, YAMRAJ BUILDING	
the address shown	<u> </u>		
is a service address for the beneficiary	__	MARKET SOUARE, ROAD TOWN	
of a Confidentiality			
Order granted under section 723B of the	D = 44.4		
	Post town		
Companies Act 1985		TOPTOLA	
otherwise, give your	Post town County / Region	TORTOLA UK Postcode	
otherwise, give your usual residential address. In the	County / Region	TORTOLA Postcode	
otherwise, give your usual residential address. In the case of a corpora-	County / Region	TORTOLA Postcode	
otherwise, give your usual residential address. In the	County / Region	TORTOLA Postcode	
otherwise, give your usual residential address. In the case of a corporation or Scottish firm, give the registered or principal office	County / Region	TORTOLA Postcode	
otherwise, give your usual residential address. In the case of a corporation or Scottish firm, give the registered	County / Region	TORTOLA Postcode	
otherwise, give your usual residential address. In the case of a corporation or Scottish firm, give the registered or principal office	County / Region Country	BRITISH VIRGIN ISLANDS Tick box if designated member Day Month Year	
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otherwise, give your usual residential address. In the case of a corporation or Scottish firm, give the registered or principal office	County / Region Country Member Reference Number * (as advised	BRITISH VIRGIN ISLANDS Tick box if designated member Day Month Year Date of Birth	
otherwise, give your usual residential address. In the case of a corporation or Scottish firm, give the registered or principal office	County / Region Country Member Reference	BRITISH VIRGIN ISLANDS Tick box if designated member Day Month Year Date of Birth	

information