



Appointment of Director

Company Name: **SOUTHWEST ORTHODONTISTS LIMITED**

Company Number: **11115043**



Received for filing in Electronic Format on the: **11/05/2020**

X94TI303

New Appointment Details

Date of Appointment: **11/05/2020**

Name: **MRS SHAKANTALA JAISINGHANI**

The company confirms that the person named has consented to act as a director.

Service Address: **2 BURNHAM AVENUE
BEACONSFIELD
ENGLAND
HP9 2JA**

Country/State Usually
Resident: **ENGLAND**

Date of Birth: ****/01/1975**

Nationality: **BRITISH**

Occupation: **COMPANY DIRECTOR**

Authorisation

Authenticated

This form was authorised by one of the following:

Director, Secretary, Person Authorised, Administrator, Administrative Receiver, Receiver, Receiver manager, Charity Commission Receiver and Manager, CIC Manager, Judicial Factor



Companies House

COMPANY NAME: SOUTHWEST ORTHODONTISTS LIMITED

COMPANY NUMBER: 11115043

A second filed ap01 was registered on 14/01/23