



Confirmation Statement

Company Name: **MEDICAL DEVICE INNOVATIONS LIMITED**

Company Number: **04344782**



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Company Name: **MEDICAL DEVICE INNOVATIONS LIMITED**

Company Number: **04344782**

Confirmation **07/12/2016**

Statement date:

Statement of Capital (Share Capital)

Class of Shares:	ORDINARY	Number allotted	1305
Currency:	GBP	Aggregate nominal value:	130.5

Prescribed particulars

FULL VOTING AND DIVIDEND RIGHTS

Class of Shares:	ORDINARY	Number allotted	13335
	A	Aggregate nominal value:	1333.5

Currency: **GBP**

Prescribed particulars

IN THE EVENT OF A RETURN OF ASSETS THE HOLDERS OF ORDINARY A SHARES ARE ENTITLED TO REPAYMENT OF THE AMOUNT OF ANY PREMIUM PAID THEREON AND THE PAR VALUE OF SUCH SHARE IN PRIORITY TO ANY PREMIUMS AND PAR VALUE OF THE ORDINARY SHARES

Class of Shares:	ORDINARY	Number allotted	35382
	B	Aggregate nominal value:	3538.2

Currency: **GBP**

Prescribed particulars

IN THE EVENT OF A RETURN OF ASSETS THE HOLDERS OF ORDINARY B SHARES ARE ENTITLED TO REPAYMENT OF THE AMOUNT OF ANY PREMIUM PAID THEREON AND THE PAR VALUE OF SUCH SHARE IN PRIORITY TO ANY PREMIUMS AND PAR VALUE OF THE ORDINARY A SHARES

Statement of Capital (Totals)

Currency:	GBP	Total number of shares:	50022
		Total aggregate nominal value:	5002.2
		Total aggregate amount unpaid:	0

Persons with Significant Control (PSC)

PSC notifications

Notification Details

Date that person became **06/04/2016**
registrable:

Name: **MR DUNCAN THOMAS ROLAND WEBSTER**

Service address recorded as Company's registered office

Country/State Usually **ENGLAND**
Resident:

Date of Birth: ****/04/1980**

Nationality: **BRITISH**

Nature of control

The person has the right to exercise, or actually exercises, significant influence or control over the company.

Confirmation Statement

I confirm that all information required to be delivered by the company to the registrar in relation to the confirmation period concerned either has been delivered or is being delivered at the same time as the confirmation statement

Authorisation

Authenticated

This form was authorised by one of the following:

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