



Confirmation Statement

Company Name: **THE COMPASSIONATE CARE BUREAU LIMITED**

Company Number: **09161363**



Received for filing in Electronic Format on the: **21/06/2024**

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Company Name: **THE COMPASSIONATE CARE BUREAU LIMITED**

Company Number: **09161363**

Confirmation Statement date: **21/06/2024**

Statement date:

Sic Codes: **78200**

86101

86102

87900

Principal activity description: **Temporary employment agency activities**

Hospital activities

Medical nursing home activities

Other residential care activities n.e.c.

The company confirms that its intended future activities are lawful.

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