

Return of Allotment of Shares

Please complete in typescript, or in bold black capitals.

CHWP000

Company Number

26077		
DRUTAPIC	 	

Company name in full	DRITAPLC					
Shares allotted (including bonus shares):						
Date or period during w hich shares were allotted (If shares were allotted on one date enter that date in the "from" box)	From Day Month Year 311 102002	To Day Month Year				
Class of shares (ordinary or preference etc)	ORDINARY					
Number all otted	2589					
Nominal value of each share	252					
Amount (if any) paid or due on each share (including any share premium)	, 856					
List the names and addresses of the	e allottees and the number of shares all	otted to each overleaf				
If the allotted shares are fully	or partly paid up otherwise than	in cash please state:				
% that each share is to be treated as paid up						
Consideration for which the shares were allotted (This information must be supported by the duly stamped contract or by the duly stamped particulars on Form 88(3) if the contract is not in writing)						
	When you have completed ar	nd signed the form send it to				



Jе

13/11/02

the Registrar of Companies at:

Companies House, Crown Way, Cardiff CF14 3UZ

DX 33050 Cardiff

For companies registered in England and Wales

Companies House, 37 Castle Terrace, Edinburgh EH1 2EB For companies registered in Scotland

DX 235 Edinburgh

COMPANIES HOUSE

Names and addresses of the allottees (List joint share allotments consecutively)

Shareholder details	Shares and share class allotted	
Name MR EDWIN WINDERS	Class of shares allotted	Number allotted
Address 121 MOUNTPLEASANT TUENCE PARR STHELENS MERSCYSIDE UK Postcode WA 9 2 2 P.S	OPD 012p	1468
Name MR PAULGLEAVE	Class of shares allotted	Number allotted
Address Nook LAVE GOLBON RATE	ORD 25P	1121
UK Postcode WAS 3JQ	L	
Name	Class of shares allotted	Number allotted
Address		,
UK Postcode		
Name	Class of shares allotted	Number allotted
Address		
UK Postcode		
Name	Class of shares allotted	Number allotted
Address		
UK Postcode		
Please enter the number of continuation sheets (if any) attached to this factor / Signed A director / secretary //administrator / administrative receiver / receiver - manager / receiver	te	lete as appropriate
Please give the name, address, telephone number and, if available, a DX number and Exchange of the person Companies House should contact if there is any query. SARAH LOCGAN 1 LINGSHAY LOCGAN DX number	Tel CUS (3	363535