

88(2)
Return of Allotment of Shares

Please complete in typescript, or in bold black capitals.
CHFP000

Company Number

Company name in full

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LOOKES PUBLIC LIMITED COMPANY

OI	- 11 - 441	/!	1		
Snares	allotted	(including	bonus	snares	j:

Date or period during which shares were allotted (If shares were allotted on one date enter that date in the "from" box)

Day Month Year

13 0 6 20 0 3

From

Day Month Year

To

Class of shares (ordinary or preference etc)

Number allotted

Nominal value of each share

Amount (if any) paid or due on each share (including any share premium)

ORDINARY	
4000	
25 Pence	
£1.04	

List the names and addresses of the allottees and the number of shares allotted 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 and signed the form send it to the Registrar of Companies at:

Companies House, Crown Way, Cardiff CF14 3UZ

DX 33050 Cardiff

For companies registered in England and Wales

DX 235 Edinburgh



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

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

Shareholder details	Shares and share class allotted			
Name A. J. MAYRS	Class of shares allotted OLDINARM	Number allotted		
Address 3 BELFAST ROAD	4000/	4000		
UK Postcode BIL41 INY	<u></u>	L		
Name	Class of shares allotted	Number allotted		
Address		l		
UK Postcode	1	L		
Name	Class of shares allotted	Number allotted		
Address				
LIK Postcodo				
UK Postcode L L L L L L L L L L L L L L L L L L L	Class of shares allotted	Number allotted		
Address	•			
UK Postcode LLLL	Class of shares allotted	Number allotted		
Address	-			
LIV Poetendo		L		
UK Postcode	form	heracore-man-		
Please enter the number of continuation sheets (if any) attached to this Signed	ite	16/07		
A di rector / secretary / administrator / administrative raceiver / receiver manager / rece	river Please	lelete 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.

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MANCHERER	W35-00H	Tel	0161	291	0=42}
DX number	DX exc	hange		·	(