

Return of Allotment of Shares

Please complete in typescript, or in bold black capitals. CHWP000

Company Number

Company name in full

4334	28			
ASR	Howwas	Ac.		

	112 K 113CDINGS 1 THE						
Shares allotted (including bonus shares):							
	From	То					
Date or period during which shares were allotted	Day Month Year	Day Month Year					
(If shares were allotted on one date enter that date in the "from" box)	26031498						
Class of shares (ordinary or preference etc)	ODDINAR-1						
Number allotted	17,600,000						
Nominal value of each share	25 Pance						
Amount (if any) paid or due on eac share (including any share premium)	25 Pence.						
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:							



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A49 COMPANIES HOUSE 14/07/01

DX 33050 Cardiff

Companies House, Crown Way, Cardiff CF14 3UZ For companies registered in England and Wales

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

DX 235 Edinburgh

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

Shareholder details	Shares and share	Shares and share class allotted		
Name MINITHODINGS VE Pla	Class of shares allotted	Number allotted		
Address SOUTHED RD	_ CD	17,600,000		
MADENHEAD BLOKS.	_ [
UK Postcode				
Name	Class of shares allotted	Number allotted		
Address				
L		_		
UK Postcode	_			
Name	Class of shares allotted	Number allotted		
Address		<u> </u>		
UK Postcode		_		
Name	Class of shares allotted	Number allotted		
Address		ı		
	-			
UK Postcode		_		
Name	Class of shares allotted	Number allotted		
Address	-			
L		_		
UK Postcode	L			
Please enter the number of continuation sheets (if any) attached to this	s form	·		
igned [)ate			
A director / secretary / administrator / administrative receiver / receiver manager / rec	ceiver Pleas	e delete as appropriate		
Please give the name, address, elephone number and, if available,				
DX number and Exchange of the erson Companies House should				
contact if there is any query.	Tel			

DX number

DX exchange