

Please complete in typescript, or in bold black capitals. CHFP041

## 88(2) Return of Allotment of Shares

Company Number	478794		
Company name in full	YATES GROUP PLC		
Shares allotted (including bonus share	es):		
Date or period during which shares were allotted (if shares were allotted on one date enter that date in the "from" box.)	From	То	
	Day         Month         Year           0   9   0   9   2   0   0   4	Day Month Year	
Class of shares (ordinary or preference etc.)	ORDINARY		
Number allotted	2,000		
Nominal value of each share	25p		
Amount (if any) paid or due on each share (including any share premium)			
List the names and addresses of the allotted shares are fully o			
% 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:

A34 0300 COMPANIES HOUSE 17/09/04 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 DX 235 for companies registered in Scotland Edinburgh

Form Revised January 2000

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

Shareholder details		Shares and share class allotted	
Name		Class of shares	Number
David Flacks		allotted	allotted
Address			
19 Charnley Street, Whitef	ield	LOrdinary	
Manchester		L	_
UK Po	stcode M 4 5 6 B E	<u> </u>	_
Name		Class of shares	Number
		allotted	allotted
Address		•	
L		L	
UK Pos	stcode L L L L L L	<u> </u>	
Name		Class of shares	Number
L		allotted	allotted
Address			
	W 4000	L	
		L	_ L
UK Pos	stcode L L L L L L	<u> </u>	
Name		Class of shares	Number
		allotted	allotted
Address			
		<u></u>	
		L	
UK Po	ostcode L L L L L L		
Name		Class of shares	Number
		allotted	allotted
Address			-
		L	_
UK Postcode L_ L_ L_ L_ L_ L_		<u> </u>	_ L
Please enter the number of section	ation chaotic) (if any) attached to the	nie form	
	ation sheet(s) (if any) attached to th	17/9/04	
Signed 3'	Date	<del></del>	
A director / secretary / administrator / administr	rative manager / receiver manager / receiver	Please delete as a	ppropriate
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.	Tei		
	DX number DX exchange		