

Return of Allotment of Shar

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

Company Number

Company name in full

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Shares allotted (including bonus shares):

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 01014

From

Month Year Day

То

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)

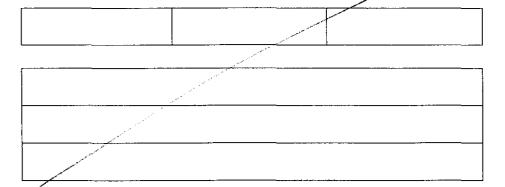
ORDINARM	URDINARY	
10,000	16,698	
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300	1069	

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 For companies registered in England and Wales

DX 33050 Cardiff

Thi 30/04/04 COMPANIES HOUSE

Companies House, 37 Castle Terrace, Edinburgh EH1 2EB

For companies registered in Scotland

DX 235 Edinburgh

Form revised January 2000

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

Shareholder details	Shares and share	class allotted
Name MR H-W JOHN	Class of shares allotted	Number allotted
Address 4 TOTNES VILLAS, TELFULD ROAD	ORDINARY	lo,000_
NEW SOUTHGATE LUNDON		<u> </u>
UK Postcode NILL ZRI		L
Name M- MICHAEL GRANGE	Class of shares allotted	Number allotted
Address 3 BULL LAME NEWINGTON SITTINGBOURNE KENT	ORDINARY	16,698
SITTINGBOURNE KENT	_	L
UK Postcode MEGLALA	L	L
Name	Class of shares allotted	Number allotted
Address		
UK Postcode		<u> </u>
Name	Class of shares allotted	Number allotted
Address		
	_	<u> </u>
UK Postcode		L
Name	Class of shares allotted	Number allotted
Address	_	
	_	
UK Postcode		<u> </u>
Please enter the number of continuation sheets (if any) attached to this	s form	
Man and	Date	
A director / secretary / administrator / administrative receivor / receiver manager / rec		delete 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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DX number DX excha			ange	_		