

**Return of Allotment of Shares** 

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

Company	Number
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01612178

Company name in full

Associated British Ports Holdings plc				
- 4-1-				

	Associated billist i ons i foldings pic			
Shares allotted (including bor	nus 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)	1 1 1 1 2 0 0 3			
Class of shares (ordinary or preference etc)	Ordinary			
Number allotted	1500			
Nominal value of each share	25p			
Amount (if any) paid or due on each share (including any share premium)	ch			
List the names and addresses of th	e allottees and the number of shares allot	tted 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:

A60 COMPANIES HOUSE

28/01/04

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

DX 33050 Cardiff

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 c	lass allotted
Name CAZENOVE NOMINEES LIMITED <esos></esos>	Class of shares allotted	Number allotted
Address 20 MOORGATE,LONDON	ORDINARY	1,500
UK Postcode E C 2 R 7 D A		
Name	Class of shares allotted	Number allotted
Address		L
UK Postcode		
Name	Class of shares allotted	Number allotted
Address		
UK Postcode		
Name L	Class of shares allotted	Number allotted
Address		
UK Postcode	L	
Name	Class of shares allotted	Number allotted
Address		
	L	
UK Postcode	L	
Please enter the number of continuation sheets (if any) attached to this fo	orm	
Signed 17 White Date	e	
A director / secretary / administrator / administrative receiver / receiver manager / receiv	er Please del	ete 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.

Associated British	Ports Holdings plc,150
Holborn, London	
EC1n 2LR	Tel 44 (0) 2074301177
DX number	DX exchange