



Companies House

for the record

88(2)

Return of Allotment of Shares

Please complete in typescript, or in bold black capitals.

CHFP000

Company Number

1636078

Company name in full

GARO UK LIMITED

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)

From

To

Day Month Year

Day Month Year

2 5 0 9 2 0 0 1

Class of shares

(ordinary or preference etc)

ORDINARY

Number allotted

25000

Nominal value of each share

£1

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

£1

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

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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:



A39 COMPANIES HOUSE 0052 14/02/02

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 class allotted	
Name GARO AB	Class of shares allotted	Number allotted
Address Box 203, S-335 25 GÄNÖSJO SWEDEN	ORDINARY K1	25000
UK Postcode L L L L L L L L		
Name	Class of shares allotted	Number allotted
Address		
UK Postcode L L L L L L L L		
Name	Class of shares allotted	Number allotted
Address		
UK Postcode L L L L L L L L		
Name	Class of shares allotted	Number allotted
Address		
UK Postcode L L L L L L L L		
Name	Class of shares allotted	Number allotted
Address		
UK Postcode L L L L L L L L		

Please enter the number of continuation sheets (if any) attached to this form

Signed M. R. [Signature] Date 11/2/02

A director / ~~secretary~~ / administrator / ~~administrative receiver~~ / receiver manager / receiver

Please 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.

CONWAY CHAPPLE & CO
1 CONCORDE DRIVE
5C BUSINESS CENTRE
CLEVEDON
NORTH SOMERSET BS21 6UH
TEL: (01275) 879520
FAX: (01275) 876649

Tel
X exchange