

88(2) Return of Allotment of Shares

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

Company Number

Company name in full

2278260	
ABACUS GROUP PLC	

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 Day Month Year Day M 0 3 0 2 2 0 0 4		To fonth Year		
Class of shares (ordinary or preference etc) Number allotted	ORDWARY 5,744				
Nominal value of each share	Sp	-			
Amount (if any) paid or due on each share (including any share premium)	940				
List the names and addresses of the allo	ttees and the number o	f shares allo	tted to each o	verleaf	
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	100				
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 com	pleted and	signed the	e form send it to	

Th **AGX5TSCZ** 0508

 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

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

DX 235

DX 33050 Cardiff

Edinburgh

Shareholder details	Shares and share	class allotted
Name LKATUGENE GOOCH	Class of shares allotted	Number allotted
Address 12 GRAMMRY ROAD, GREAT BEOWEN,	DROWARY	3 590
MARLBOROUGH, WILTSHIRE	_	£
UK Postcode SN&L 34E	1	<u> </u>
Name MARK Sorwson	Class of shares allotted	Number allotted
Address 52 MERRITT ROAD, DOGOT, OKON	DROWARY	2,154
UK Postcode OK LL COO	_	L
Name	Class of shares allotted	Number allotted
Address		
UK Postcode V L L L L L	_	L
Name	Class of shares allotted	Number allotted
Address		
Ulk Postcode		L
Name	Class of shares allotted	Number allotted
Address	-	
	_	L
UK Postcode		<u>L</u>
Please enter the number of continuation sheets (if any) attached to this	3 form 2 1 2 1 2	1.
A director secretary / administrator / administrative receiver / receiver manager / rec	ate S/V/0	delete as appropriate
Please give the name, address,		
elephone number and, if available, a DX number and Exchange of the person Companies House should		
contact if there is any query.	Tel	

DX number

DX exchange