



Please complete in typescript,  
or in bold black capitals  
CHFP029

# 88(2)

## Return of Allotment of Shares

Company Number

02459245

Company Name in full

Hanson (MRS) 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  
Day Month Year

1 6 0 1 2 0 0 3

To

Day Month Year

Class of shares  
(ordinary or preference etc)

Ordinary

Number allotted

1

Nominal value of each share

£1.00

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

£551,673.41

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:

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 <u>V.E.A Limited</u>		Class of shares allotted	Number allotted
Address <u>1 Grosvenor Place, London</u>		<u>Ordinary</u>	<u>1</u>
UK Postcode <u>S W 1 X 7 J H</u>			
Name _____		Class of shares allotted	Number allotted
Address _____			
UK Postcode <u>      </u>			
Name _____		Class of shares allotted	Number allotted
Address _____			
UK Postcode <u>      </u>			
Name _____		Class of shares allotted	Number allotted
Address _____			
UK Postcode <u>      </u>			
Name _____		Class of shares allotted	Number allotted
Address _____			
UK Postcode <u>      </u>			

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

Signed

*Graham Dornford*

Date

24/01/03

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.

Miss G K Bains

1 Grosvenor Place, London, SW1X 7JH

Tel 020 7259 4156

DX number

DX exchange