

Please complete in typescript, or in bold black capitals.

CHFP025

Company Number

Company name in full

Date or period during which

Nominal value of each share

share (including any share premium)

% that each share is to be

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

**COMPANIES HOUSE** 

treated as paid up

contract is not in writing)

Amount (if any) paid or due on each

shares were allotted (if shares were allotted on one date

Class of shares (ordinary or preference etc)

Number allotted

enter that date in the "from" box)

88	(2)	
Return of Allotm	ent of Share:	s

02514287 Telewest Communications Group Limited Shares allotted (including bonus shares): To From Year Day Month Year Day Month 2101016 Ordinary 1,735,850,550 £1.00 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:

> When you have completed and signed the form please send it to the Registrar of Companies at:

Companies House, Crown Way, Cardiff, CF14 3UZ DX 33050 Cardiff For companies registered in England and Wales

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB DX 235 Edinburgh For companies registered in Scotland



28/12/2006

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

Shareholder details	Shareholder details Shares and share class	
Name	Class of shares	Number
Telewest Communications Holdings Limited	allotted	allotted
Address		
Export house, Cawsey Way, Woking	Ordinary	4736,850,550
Surrey	Ĺ <u>.</u>	
UK Postcode رق ت رع رع مر X	L	
Name	Class of shares allotted	Number allotted
		<u>.</u>
Address		
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UK Postcode		
Name	Class of shares	Number
·	allotted	allotted
Address		
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UK Postcode	<u> </u>	
Name	Class of shares	Number
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Address		
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Name	Class of shares allotted	Number allotted
	anotted	anotted
Address		
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UK Postcode	L	· 1
Please enter the number of continuation sheets (if any) attached to this form		
Signed R. Warren Date	18/12/06	
A director / secretary / all XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	•	elete as appropriate
Please give the name, address, Fried Frank Harris Shriv telephone number and, if available,	er & Jacobson (Lor	ıdon) LLP

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.

Fried Frank	Harris Shriver	& Jacobson	(London) LLP
99 City Road	, LONDON, EC1Y	1AX	10 m 10 m 10 m
		Tel 020	7 972 9600
DX number DX exchange			