

Return of Allotment of Shares

To

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

Company Number

Company name in full

27178	35		
LUCKY	JOE	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)

Class of shares (ordinary or preference etc)

Number allotted

Nominal value of each share

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

Day	Month	Year	Day	Month	 Year	
1 3	10	2002		.	11	
-					 	

From

oepinaem		
49,900		
£1.00		
£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:

% 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)

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100%		



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0828 30/08/03

When you have completed and signed the form 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 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	Class of shares allotted	Number allotted
MRS R CHAPMAN	allotted -	anotted
Address		
119 CHURCH ROSO	LORDINARY	12,475
London	_	
UK Postcode		<u> </u>
Name	Class of shares	Number
Me T CHAPMAN	allotted	allotted
Address		
119 CHURCH ROAD	LOCO JACT	37,425
(London)	_	
UK Postcode Suis		1
Name	Class of shares allotted	Number allotted
Address	-	,
		L
UK Postcode		<u> </u>
Name	Class of shares allotted	Number allotted
Address	-	
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UK Postcode しょとに ににに		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	form	
Signed A director / secretary / administrator / administrative receiver / receiver manager / receiver		Lelete as appropriate
Please give the name, address, telephone number and, if available, !yan Sopher & Co		
a DX number and Exchange of the CHARTERED ACCOU	NTANTS	
contact if there is any query. ELSTREE WAY		
DX nu BOREHAMWOOD HERTS WD6 1JD		