



# 88(2)

Please complete in typescript,  
or in bold black capitals.

CHFP001

## Return of Allotment of Shares

Company Number

02849316

Company name in full

URBAN RETREATS 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	8	1 1	2	0	0 3

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)

ORD		
215000		
£1		
£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

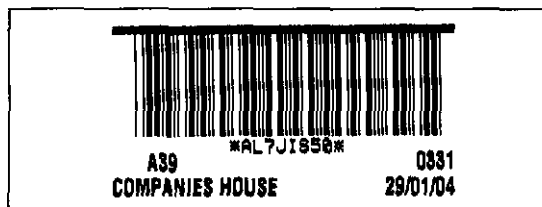
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Consideration for which  
the shares were allotted  
(This information must be supported by  
the duly stamped contract or by the duly  
stamped particulars on Form 88(3) if the  
contract is not in writing)


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

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



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

Shareholder details		Shares and share class allotted	
Name GEORGE CHRISTOPHER HAMMER		Class of shares allotted	Number allotted
Address FLAT 5, 74 PORTLAND PLACE, LONDON		ORD	215000
UK Postcode W1B 1NT			
Name 		Class of shares allotted	Number allotted
Address 			
UK Postcode L L L L L L L			
Name 		Class of shares allotted	Number allotted
Address 			
UK Postcode L L L L L L L			
Name 		Class of shares allotted	Number allotted
Address 			
UK Postcode L L L L L L L			
Name 		Class of shares allotted	Number allotted
Address 			
UK Postcode L L L L L L L			

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

Signed

*[Signature]*  
 A director / secretary / administrator / administrative receiver / receiver manager / receiver

Date

23.1.04

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.

BLEVINS FRANKS LIMITED, BARBICAN	
HOUSE, 26-34 OLD STREET, LONDON,	
EC1V 9QQ	Tel Ref: DA/U3098
DX number	DX exchange