

88(2)
Return of Allotment of Shares

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

Company Number

2920061

Company name in full	IMAGINATION TECHNOLOGIES GROUP PLC			
Shares allotted (including bonus shares):				
	From To			
Date or period during which shares were allotted	Day Month Year Day Month Year			
(If shares were allotted on one date enter that date in the "from" box)	0 6 1 2 2 0 0 4			
Class of shares (ordinary or preference etc)	ORDINARY			
Number allotted	17550			
Nominal value of each share	£0.10			
Amount (if any) paid or due on each share (including any share premium)	ch 46p			
List the names and addresses of th	ne 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)				

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 Edinburgh

DX 33050 Cardiff



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

Shareholder details		Shares and share class allotted	
Name CAZENOVE NOMINEES LIMITED		Class of shares allotted	Number allotted
Address PARTICIPANT ID 142CN MEMBER ACC	COUNT ESOS	ORDINARY	17,550
20 MOORGATE, LONDON		_	
UK Pos	tcode EC2R6DA		<u> </u>
Name		Class of shares allotted	Number allotted
Address			
UK Pos	tcode		L
Name		Class of shares allotted	Number allotted
Address			
UK Pos	tcode	<u> </u>	L
Name		Class of shares allotted	Number allotted
Address			,
UK Pos	tcode		L
Name		Class of shares allotted	Number allotted
Address			
		_	
UK Pos	tcode		
Please enter the number of continuati	on sheets (if any) attached to this	s form	
Signedi.Sell	lų	Jate /5-12	-04
A director / secretary <u>Ladministrator / admin</u>	oistrative receiver / receiver manager / rec	power 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.		Tel	
	DX number	DX exchange	