

88(2)
Return of Allotment of Shares

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

Company Number

2920061

Company name in full

Shares allotted (including bonus shares):						
	From	From		То		
Date or period during which shares were allotted	Day Month	Day Month Year Day		Month Year		
(If shares were allotted on one date enter that date in the "from" box)	0   1 0   8 2	2 0 0 6				
Class of shares (ordinary or preference etc)	ORDINARY	ORDINAR'	Y	ORDINARY		
Number allotted	3750	10000		1250		
Nominal value of each share	£0.10	£0.10		£0.10		
Amount (if any) paid or due on eac share (including any share premium)	h 19p	34.5p		46p		
List the names and addresses of the	e allottees and the number	of shares allo	tted to each	overleaf		
If the allotted shares are fully	or partly paid up othe	rwise than ii	n cash plea	se 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 co	mpleted and	d signed th	e 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)

	Onares and share	class allotted
Name CAZENOVE NOMINEES LIMITED	Class of shares allotted	Number allotted
Address PARTICIPANT ID 142CN MEMBER ACCOUNT ESOS	ORDINARY	15,000
20 MOORGATE, LONDON	1	
UK Postcode E C 2 R 6 D A		
Name	Class of shares allotted	Number allotted
Address		
		L
UK Postcode LLLLL	L	
Name	Class of shares allotted	Number allotted
Address		
UK Postcode	L	<u> </u>
Name	Class of shares allotted	Number allotted
Address		
		L
UK Postcode	L	<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 Suhmy enelly Da	te <u>8 - 8 - 0</u>	م
A d <del>irecto</del> r / secretary / <del>administrat</del> or / administ <del>rative receive</del> r / receiver manager / recei	iver 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 exchange	