

88(2)
Return of Allotment of Shares

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

Company	Number
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2920061

Company name in full

Company name in ran	IIVIAGINATION TECHNOLOGIES PLC			
Shares allotted (including bo	nus shares):	···		
Date or period during which shares were allotted (If shares were allotted on one date enter that date in the "from" box)	From  Day Month Year  0 7 0 3 2 0 0 5	To  Day Month Year		
Class of shares (ordinary or preference etc)	ORDINARY			
Number allotted	7524			
Nominal value of each share	£0.10P			
Amount (if any) paid or due on ead share (including any share premium)	ch 51.5P			
List the names and addresses of th	he allottees and the number of shares allot	ted 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:

A50 COMPANIES HOUSE 0149 10/05/05 Companies House, Crown Way, Cardiff CF14 3UZ For companies registered in England and Wales DX 33050 Cardiff

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		Shares and share	share class allotted	
Name ALAMO SPAARGAREN		Class of shares allotted	Number allotted	
Address 16 TORTWORTH ROAD HORFIELD BR	ISTOL BS7 9PA	ORDINARY	7524	
UK Post	code <u> </u>			
Name		Class of shares allotted	Number allotted	
Address			L	
UK Post	code		<u> </u>	
Name		Class of shares allotted	Number allotted	
Address				
UK Pos	tcode			
Name		Class of shares	Number	
Address		allotted	allotted	
UK Pos	tcode			
Name		Class of shares allotted	Number allotted	
Address				
UK Pos	tcode		L	
Please enter the number of continuat	ion sheets (if any) attached to	o this form		
Signed	Instrative receiver / receiver manage	Date 6.05.0	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.	DX number	Tel  DX exchange		