

Return of Allotment of Shares

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

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Company	Number

Company Number	2920061			
Company name in full	IMAGINATION TECHNOLOGIES GROUP PLC			
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 0 7 0 1 2 0 0 2			
Class of shares (ordinary or preference etc)	ORDINARY			
Number allotted	4000			
Nominal value of each share	10p			
Amount (if any) paid or due on each share (including any share premium)	53p			
List the names and addresses of th	e 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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COMPANIES HOUSE

16/01/02

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 APOLLO NOMINEES LTD	Class of shares allotted	
Address PARTICIPANT ID 002 MEMBER ACCOUNT DEP	ORDINARY	4,000
1 FINSBURY AVENUE, LONDON	1	
UK Postcode EC2M2PP	L	
Vame	Class of shares allotted	Number allotted
Address		
		<u> </u>
UK Postcode		
Name L	Class of shares allotted	Number allotted
Address		
		L
UK Postcode		
Name	Class of shares allotted	Number allotted
Address		
		<u> </u>
UK Postcode _ L _ L _ L	L	
Name	Class of shares allotted	Number allotted
Address		
UK Postcode		<u> </u>
Please enter the number of continuation sheets (if any) attached to this f	form	
gnedDat	te	
A director / secretary / administrator / administrative receiver / receiver manager / receiver		delete as appropriate
ease give the name, address, lephone number and, if available,		
DX number and Exchange of the erson Companies House should ontact if there is any query.	Tel	
made it stided to diff space;	Tel	