

Return of Allotment of Shares

Please complete in typescript, or in bold black capitals. CHFP000

Company Number

Company name in full

2960433		
CFS	INGERDENT	LIMITED

Shares allotted (including bonus s	shares):			
	From	То	То	
Date or period during which	Day Month Year	Day Month Year		
shares were allotted (If shares were allotted on one date enter that date in the "from" box)	25/1/2,003			
Class of shares (ordinary or preference etc)	ORDINARY		_	
Number allotted	70,000			
Nominal value of each share	21			
Amount (if any) paid or due on each share (including any share premium)	E		_	
List the names and addresses of the allo	ttees and the number of shares al	lotted to each overleaf		
If the allotted shares are fully or p	artly 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		<u></u>		



stamped particulars on Form 88(3) if the

COMPANIES HOUSE 05/04/04

Form revised January 2000

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

DX 235 Edinburgh

Companies House, 37 Castle Terrace, Edinburgh EH1 2EB For companies registered in Scotland

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

Shareholder details	Shares and share	ciass allotted
Name ANDREW OSSIE HARWOOD	Class of shares allotted	Number allotted
Address 31 CAVENDISH DRAVE	ORDINARY	35,000
EDGWARE		
UK Postcode # A & _ 7 N F		
Name SYLVIA HELEN HARWOOD	Class of shares allotted	Number allotted
Address 31 CANENDISH DRIVE	O.R.DINARY	35,000
UK Postcode H A 8 L 7 NS		
Name	Class of shares allotted	Number allotted
Address		
LIV Postcado		
UK Postcode Name	Class of shares allotted	Number allotted
Address	- anotted	anotted
		L
UK Postcode		L
Name	Class of shares allotted	Number allotted
Address	_	
<u></u>	_	L
UK Postcode L L L L L		L
Please enter the number of continuation sheets (if any) attached to this	form	
	ate <u>29-3-04</u>	
A director / secretary / administrator / administrative-receiver / receiver manager / receiver manager / receiver / receiver manager / receiver / receiver / receiver manager / receiver /	erver Please o	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.

LEAPMAN	WEISS
Chartered A	ccountants
1st Floor, Fill	iside House
2-6 Frie:	m Park —

LONDON N12 9BT

Tel 020 8446 2220

DX number

DX exchange