## G

## COMPANIES FORM No. 88(2)(Rev 1988)

## Roturn of allotments of shares

Pursuant to section 88(2) of the Companies Act 1985 (the Act)



Please do not write in this margin

CHA 116

Please complete legibly, preferably in black type, or bold block lettering To the Registrar of Companies (address overleaf) (See note 1)

(REVISED 1988)

This form replaces forms PUC2, PUC3 and 88(2)

Company number	
3152115	

1. Name of Company

q	Ins	ert	full	namo
	of	CO	npa	ny

· WORKNORTH IL LIMITED

2. This section must be completed for all allotments

t Distinguish between ordinary, preference, etc.

Description of shares †	A' CLASS REDEEMABLE PREFERENCE	18) CUASS 2005EMABLE PREFERENCE	
A Number allotted	150,000	150,000	
B Nominal value of each	و ١٠٥٥	£ 1.00	£
C Total amount (if any) paid or due and payable on each share (including premium if any)	£ 1,00	£ 1.00	E

Complete
(a) or (b) as
appropriate

Date(s) on which the shares were	allotted		
(a) [on 14 MAY	_19 <u>98</u>	]§, or	
(b)-[from	49 <del></del> _	to	
The names and addresses of the given overleaf	allottees and	the number of sh	ares allotted to each should be

3. If the allotment is wholly or partly other than for cash the following information must be given (see notes 2 & 3)

DExtent to which each share is to be treat Please use percentage.	ted as paid up.	100%.	100%.	
E Consideration for which the shares were allotted CASH.				
<u> </u>	<del> </del>			

Notes

1. This form should be delivered to the Registrar of Companies within one month of the (first) date of allotment

2. If the allotment is wholly or partly other than for cash, the company must deliver to the Registrar a return containing the information at D & E. The company may deliver this information by completing D & E and the delivery of the information must be accompanied by the duly stamped contract required by section 88(2)(b) of the Act or by the duly stamped prescribed particulars required by section 88(3). (Form No 88(3)).

3. Details of bonus issues should be included only in section 2.

Presentor's name, address, telephone number and reference (if any):

Lacerform-International-Ltd.

1st Floor, 9-11-Prinsess

Street
Knutsford
Chechira WALS SBY

DX: 22967 Knutsford

For official use



## 4. Names and addresses of allottees

Please do not write in the margin

Please complete legibly, preferably in black type, or bold block lettering

Names and Addresses	Number of shares allotted		
	Ordinary	Preference	Other
MANCHESTER AIRPORT PLC TOWN HALL MANCHESTER MGO ILA		A; CLASS 150,000	
AIRPORT COMMERCIAL VENTURES LIMITED HALE TOP HUNSE EAST THORUGY LANE MANCHESTER MIRPORT M90 509.		83 CT488	
Total		300,000	

Where the space given on this form is inadequate, continuation sheets should be used and the number of sheets attached should be indicated in the box opposite:

Designation ‡.

‡ Insert director, secretary, Administrator, Administrative Receiver or Receiver (Scotland) as

appropriate

Companies registered in England and Wales or Wales should deliver this form to:-

Companies registered in Scotland should deliver this form to:-

The Registrar of Companies Companies House Crown Way Maindy Cardiff CF4 3UZ The Registrar of Companies Companies Registration Office 102 George Street Edinburgh EH2 3DJ

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SECRETARY

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