AMENDING FORM

Package:

'Laserform'

by Laserform International Ltd.

Please complete in typescript, or in bold black capitals.

[CHFP025]

Company Number

Company name in full

rm' _td.	8	8	(2)

Return of Allotment of Shares

To

|--|

From

Orvet UK Limited

Shares allotted (including bonus shares):

Date or period during which shares were allotted

(If shares were eliotted on one date enter that date in the "from" box)

Class of shares (ordinary or preference etc)

Number allotted

Nominal value of each share

Amount (if any) paid or due on each share (including any share premium)

£1.00 plu= us\$35,870,678.40	
€1.00	
100	
Ordinary	

List the names and addresses of the 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

100

Consideration for which the shares were allotted (This information must be supported by the duly stamped contract or by the duly stamped particulars on Farm 88(3) if the contract is not in writing) 3,016 shakes in Teva Pharmaceuticals USA



A87 COMPANIES HOUSE 04/04/08

COMPANIES HOUSE

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uzo/ 14/03/03 When you have completed and signed the form please send to the Registrar of Companies at:

companies House, Crown Way, Cardiff, CF14 3UZ DX 33050 Cardiff or companies registered in England and Wales

ompanies House, 37 Castle Terrace, Edinburgh, EH1 2EB for companies registered in Scotland DX 235 Edinburgh

6089536

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

Shareholder details		Shares and share class allotted			
Name		Class of shares	Number		
Teva Pharmaceuticals B.V.		allotted	allotted		
Address					
(3641 RK) Mijdrecht, The Nethe	erlands, Industrieweg 23	Ordinary	100		
<u> </u>		_	L		
UK Pos	stcode		<u> </u>		
Name		Class of shares	Number		
L		allotted -	allotted		
Address					
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UK Pos	stcode	L			
Name		Class of shares allotted	Number allotted		
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Address					
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Address		-			
1					
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UK Pos	stcode	L			
			·· ·····		
Please enter the number of continuation	on sheets (if any) attached to this form	n			
Sland Blown	Dat	December 2002			
A director / XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	Date (1900)		lete as appropriate		
		7,10030 00			
Please give the name, address, Denton Wilde Sapte telephone number and, if available,					
a DX number and Exchange of the person Companies House should	1 Fleet Place, London, EC4M 7WS				
person Companies House should contact if there is any query.	Ref: DH/40956.00066 Tel 020 7246 7000				
	DX number DX:242 DX exchange LONDON				
Leserform International 02/00			6090626		