

for the record

Return of Allotment of Shares

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

Company	Number
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manager name in full

3196656			
A-SPAN LIMITED	 		

Company name in full	A-SPAN LIMITED			
Shares allotted (including bor	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 2 4 1 1 1 9 9 9	To Day Month Year		
Class of shares (ordinary or preference etc)	"B" shares			
Number allotted	2			
Nominal value of each share	£2			
Amount (if any) paid or due on ea share (including any share premium)	ech £2			
List the names and addresses of t	the allottees and the number of shares allot	ted to each overleaf		
If the allotted shares are fully	y 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	у			

When you have completed and signed the form send it to the Registrar of Companies at:



COMPANIES HOUSE

contract is not in writing)

14/06/01

Companies House, Crown Way, Cardiff CF14 3UZ For companies registered in England and Wales

DX 33050 Cardiff

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 class		lass allotted
Name Mrs M Evans	Class of shares allotted	Number allotted
Address 484 Kettering Road	"B" share	1
Northampton		
UK Postcode NN3 6QP		
Name Mrs K Billings	Class of shares allotted	Number allotted
Address The Old Chapel. High Street. Spaldwick	"B" share	1
Huntingdon. Cambridgeshire		
UK Postcode PE180TD		
Name	Class of shares allotted	Number allotted
Address		L
UK Postcode		L
Name	Class of shares allotted	Number allotted
Address	_	
		L
UK Postcode டட்டட		L
Name	Class of shares allotted	Number allotted
Address	_	
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		L
UK Postcode L L L L L L		. <u> </u>
Please enter the number of continuation sheets (if any) attached to the	nis form	
Signed January.	Date 1/6/07	
A director / secretary / administrator / administrative receiver / receiver manager / r	receiver Please	delete as appropriat

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.

Dove Naish. I	Eagle House. 28 Billing Road.		
Northampton	NN1 5AJ		
Tel			
DX number	DX exchange		