

or in bold black capitals CHFP029	Return of Allotment of Shares
Company Number	3230922
Company Name in full	Pier House (Freehold) Limited
Shares allotted (including bo	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 To Day Month Year Day Month Year 1 4 0 1 2 0 0 4
Class of shares (ordinary or preference etc)	Ordinary £1
Number allotted	1.00
Nominal value of each share	£ 1.00
Amount (if any) paid or due on ea share (including any share premium)	£ 0.00
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	
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)	
	When you have completed and signed the form send it to the Registrar of Companies at:

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COMPANIES HOUSE 06/02/04

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

Companies House, 37 Castle Terrace, Edinburgh EH1 2EB DX 235 Edinburgh For companies registered in Scotland

DX 33050 Cardiff

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

Shareholder details	Shares and share	Shares and share class allotted	
Name SHINKAR M.N.A.M; SHINKAR J.A.M.; SHINKAR E.A.M; SHINKAR N.A.M	Class of shares allotted	Number allotted	
Address 18 Pier House, Cheyne Walk,	Ordinary £1	1.00	
London		_	
UK Postcode LS LW3 L L L	<u> </u>		
Name	Class of shares allotted	Number allotted	
Address			
UK Postcode LLLL L	<u> </u>	_	
Name	Class of shares allotted	Number allotted	
Address			
UK Postcode LLLL	<u> </u>		
Name	Class of shares allotted	Number allotted	
Address			
UK Postcode L L L L	<u> </u>		
Name	Class of shares allotted	Number allotted	
Address			
<u> </u>			
L			
UK Postcode LLLL LL			
Please enter the number of continuation sheets (if any) attached to	o this form		
Signed	Date _ 5 ~ 0 Z - 00	<u>,</u>	
A director / secretary / administrator / administrative receiver / receiver mana	ager / receiver Please o	lelete as appropriate	
Please give the name, address, Argles Stoneham Burston			

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.

Argles Stoneham Burstows			
Stoneham House, 17 Scarbrook Road, CROYDON, CRO 1SQ.			
	Tel	020 8681 2231	
DX number DX 2609	DX exchange	CROYDON	