

## **Return of Allotment of Shares**

CHFP000

Company	Number
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33226	59		

mpany name in full	CHARTERHOUSE THERAPEUTICS LIMITED.
ares allotted (including bo	onus shares):
ate or period during which ares were allotted shares were allotted on one date ter that date in the "from" box.	From To  Day Month Year Day Month Year  3   1   0 2 0 0 0
lass of shares ordinary or preference etc)	PREFERENCE
umber allotted	3997
ominal value of each share	\$0.01
mount (if any) paid or due on ea	ach \so5.33
ist the names and addresses of	the allottees and the number of shares allotted to each overleaf
f the allotted shares are full	ly 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 du stamped particulars on Form 88(3) if the contract is not in writing)	ily

the Registrar of Companies at:



A30 COMPANIES HOUSE

13/03/01

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

DX 33050 Cardiff

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

DX 235 Edinburgh

Shareholder details	Shares and share	class allotte
Name HEALTHCAP 1999 KB	Class of shares allotted	Number allotted
Address		
STUREGATAN 34	PREFERENCE	5957
114 36 STOCKHOLL SWEDEN	_	<del></del>
UK Postcode LLLLL		
Name	Class of shares	
OFCO	allotted —	allotted
Address		_
STUREGATAN 34	PREFERENCE	<u>40</u>
114 36 STOCKHOLM SWEDEN	_	L
UK Postcode		L
Name	Class of shares allotted	Number allotted
Address		
	_	L
	_	L
UK Postcode	<u> </u>	L
Name	Class of shares allotted	Number allotted
Address	_	
· · · · · · · · · · · · · · · · · · ·	_	L
	_	L
UK Postcode LLLLL		Ļ
Name	Class of shares	Number allotted
Address	-	anottoa
UK Postcode		L
Please enter the number of continuation sheet(s) (if any) attached to the	is form	
I the Sloone	ate 31.10.200	<b>™</b>
A director / secretary / administrator / administrative receiver / receiver manager / receiver		elete as appropria

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.

NICHOL	to Haves	<b>-</b>	
15 CITY	BUSINESS	CENTR	E, HYDE SMEET
UINCHESTER, HAMPSHIRE Tel 01962 843377			
DX number	NIA D	X exchange	N/ A .