

From



Return of Allotment of Shares

To

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

**Company Number** 

3394741

nam Powerspring Ltd	Davids Davids 144	
	Pentham Powerspring Ltd	 
	- Changin Fowerophing Ltd	

Shares	allotted	(including	bonus	shares)

Date or period during which shares were allotted (If shares were allotted on one date enter that date in the "from" box)

Month Month Year Day Year Day

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)

Ordinary	
10 000	
One pence	
£1-00	

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)

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

Companies House, Crown Way, Cardiff CF14 3UZ

DX 33050 Cardiff

For companies registered in England and Wales

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

DX 235 Edinburgh



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**COMPANIES HOUSE** Form Revised January 2000

## RESCINDED Names and addresses of the allottees (List joint share allotments consecutively)

Shareholder details	Shares and share	class allotted
Name ROBERT PATRICK KEEGAN	Class of shares allotted	Number allotted
Address 2 UPPER BRIDGE STREET WYE	ORDINARY	10000
ASHFORD, KENT	\	
UK Postcode TN255KF	L	<u> </u>
Name	Class of shares allotted	Number allotted
Address		
UK Postcode しょしにし		L
Name	Class of shares allotted	Number allotted
Address		
UK Postcode LLLL		L
Name	Class of shares allotted	Number allotted
Address		
		<u> </u>
UK Postcode LLLLL		
Name	Class of shares allotted	Number allotted
Address		
		<u> </u>
UK Postcode		
Please enter the number of continuation sheets (if any) attached to th	ie form	
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gned A director / secretary / administrator / administrative receiver / receiver manager / re	Date $\frac{5/4/2007}{2000}$	elete as appropriate
ease give the name, address,		
lephone number and, if available,		
DX number and Exchange of the erson Companies House should		
ontact if there is any query.	Tel	

DX number

DX exchange