

Return of Allotment of Shares

To

Year

0, 0, 0

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

Company Number

Company name in full

From

	 	 	
AGM Batteries Limited			

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)

Day	Month	Year	Day Month
1,1	0 6	2,0,0,1	1 1 0 6 2

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)

"A"	
500000	
£1.00	
£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:

13/06/01

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

COMPANIES HOUSE

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

Shareholder o	details	Shares and share	class allotted
Name AEA Technology plc		Class of shares allotted	Number allotted
Address 329 Harwell, Didcot, Oxfordshire		("A"	500,000
UK Pa	ostcode OX110RA		L
Name		Class of shares allotted	Number allotted
Address			
		L	<u></u>
Name	ostcode LLLLL	Class of shares allotted	Number
Address		рэлонь 	allotted
L			
UK Po	ostcode L L L L L L L	<u> </u>	· L———
Name		Class of shares allotted	Number allotted
Address			·
UK P	ostcode LLLLLL		- L
Name		Class of shares allotted	Number allotted
Address			
L			_
UK P	ostcode LLLLLL		
Please enter the number of continu	ation sheets (if any) attached to	this form 0	
Signed Signed Adirector/secretary (administrator/sec	d ministrative rece iver / rec eiver mana ge	Date 11/06/01 er/receiver Please	e delete as appropriate
Please give the name, address, telephone number and, if available, a DX number and Exchange of the Business Park, Thurso,			Thurso
person Companies House should contact if there is any query.	Caithness	Tel 01847 8	20006

DX number

DX exchange