

# 88(2)

Τo

### Return of Allotment of Shares

From

Please complete in typescript,
or in bold black capitals.

CHFP010

**Company Number** 

_			
Com	pany	Name	in ful

3526126				
Cliniserve Holdings	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)

#### 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)

Day	Month	Year	_ Day _	Month	Year
2 9	0 3	2 0 0 6			1 1

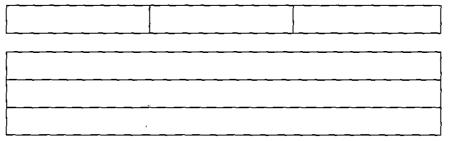
Ordinary	
21,000	
€1.00	
£3.00	

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	bе	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:

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

## Names and addresses of the allottees (List joint share allotments consecutively) 3526126

Shareholder details		Shares and share class allotted			
Name		Class of shares allotted	Number allotted		
James Daniel Geary		£1.00 Ordinary	21,000		
Address 92 Harvard Road, Sandhurst, Surr	ey				
UK postcode GU47 OUR					
Name		Class of shares allotted	Number allotted		
			)		
Address					
UK postcode					
Name		Class of shares allotted	Number allotted		
		1			
Address					
		<b> </b>	}		
UK postcode					
Name		Class of shares allotted	Number allotted		
Address	<del></del>				
			{		
UK postcode		<u> </u>			
Please enter the number of cor	ntinuation sh	eets (if any) attached to this form			
Signed Swallance		• •	L		
A director / secretary / administrator / administ	trative receiver		, March 29, 2006		
Please give the name, address, telephone		arnes, Cliniserve Limited	Winnetrow Business		
number and, if available, a DX number and Exchange of the person Companies House	<b></b>	Innetrow Road, Chichester	<del></del>		
should contact if there is any query.		Tel 01243	<del></del>		
	DX number		0.2		