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117

Please complete in typescript,
or in bold black capitals.

Application by a public company for certificate to commence business

Company Number

3649489

Company Name in full

CATALYST HEALTHCARE (WORCESTER) PLC



* F 1 1 7 0 F 1 0 *

applies for a certificate that it is entitled to do business and exercise
borrowing powers, and, for that purpose,

I, THOMAS DOWNS ANDERSON

of 10 STROUDWATER PARK, ST GEORGE'S AVENUE, WEYBRIDGE,

SURREY KT13 0DT

1 Please delete as appropriate.

1 [a director] ~~the secretary~~ of the above company do solemnly and sincerely
declare that:-

1. the aggregate nominal value of the company's
allotted share capital is not less than
£50,000

2. the aggregate amount paid up on the allotted share
capital of the company at the time of this
application is

£ 50,000

3. the 1 ~~estimated~~ amount of the
preliminary expenses of the company is

£ NIL

2 Please insert the name(s) of
person(s) by whom expenses
paid or payable.

2

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.

Clifford Chance
200 Aldersgate Street
London

EC1A 4JJ

London-1/320529/01

Ref: AHM/C4698/90

Tel 0171 600 1000

DX number DX No 606

DX exchange LONDON

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

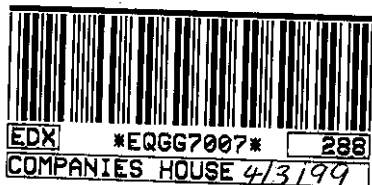
Companies House, Crown Way, Cardiff, CF4 3UZ DX 33050 Cardiff
or companies registered in England and Wales

or

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB

for companies registered in Scotland

DX 235 Edinburgh



EDX *EQGG7007* 288
COMPANIES HOUSE 4/3/99

① [4a. no amount or benefit has been paid or given or is intended to be paid or given to any of the promoters of the company]

① [~~4b. the amount or benefit paid or given or intended to be paid or given to any promoter of the company is:~~]

① Please delete as appropriate.

Promoter No 1;

The amount paid or intended to be paid

£

Any benefit given or intended to be given

The consideration for such payment or benefit

Promoter No 2;

The amount paid or intended to be paid

£

Any benefit given or intended to be given

The consideration for such payment or benefit

Promoter No 3;

The amount paid or intended to be paid

£

Any benefit given or intended to be given

The consideration for such payment or benefit

And I make this solemn Declaration conscientiously believing the same to be true and by virtue of the Statutory Declarations Act 1835.

Declarant's signature

TD Anderson

Declared at

200 ADELPHI GATE STREET, LONDON EC1A 3DE

the

THIRD

day of

MARCH

One thousand nine hundred and ninety

NINE

② Please print name.

before me②

MARK ANDREW McQUILLAN

Signed

Mark Andrew McQuillan

Date

3 MARCH 1999

A Commissioner for Oaths or Notary Public or Justice of the Peace or Solicitor