

Return of Allotment of Shares

Please complete in typescript, or in bold black capitals. CHFP000

Company Number

7674252

Company name in full

LIQUID LIGHT	OIGITAL LIM MED	
		*

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)

	Fro	m	То
Day	Month	Year	Day Month Year
0,1	03	2001	\$

Class of shares (ordinary or preference etc)

Number älfotted

Nominal value of each share

Amount (if any) paid or due on each share (including any share premium)

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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

100/ 100% 1001

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 For companies registered in England and Wales

DX 33050 Cardiff

22/08/01 **COMPANIES HOUSE**

Form revised January 2000

Companies House, 37 Castle Terrace, Edinburgh EH1 2EB

For companies registered in Scotland

DX 235 Edinburgh

Shareholder d	letails	Shares and share	Shares and share class allottee		
Name	00.4	Class of shares	Number		
ROBERT LEURNARD	DAY	allotted	allotted		
Address	- A -	(0)			
22 A DUKES LANE	BRIGHTON	B' NON-NOTING			
EAST SUSSEX		_	<u> </u>		
UK Pos	stcode KVI_IBC				
Name		Class of shares	Number		
L		allotted	allotted		
Address		La			
FINN FASIAN LEVELIS REA		(C' NON-VOTING			
L 7 BATES ROAD	BRIGHTON E. SUSSEX		L		
	stcode & VI _ L6LE		L		
Name		Class of shares	Number		
MILS MARGERIE DAY		allotted	allotted		
Address					
LA CARRIERE LE	= HOCQ	D' NUN-UUTING			
ST CLEMENT SERT	FY				
UK Pos	stcode E E2_ & FQ				
Name		Class of shares allotted	Number allotted		
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Address					
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UK Post	tcode LLLLL				
Name		Class of shares	Number		
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Address					
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Please enter the number of continuation	on sheets (if any) attached to this	form			
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igned	Da				
A director / secretary / administrator / admin	istrative receiver / receiver manager / rece	river Please del	ete as appropriate		
lease 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			