

Return of Allotment of Shares

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

Company Number

3704879							
9-11	HARGRAVE	ROAD	LIMMED			 	

Company name in full	9-11 HARBRAVE ROAD LIMITED								
,									
Shares allotted (including bonus shares):									
	From	т.	То						
Date or period during which shares were allotted	Day Month Ye	ear Day Month	Year						
(If shares were allotted on one date enter that date in the "from" box)	218 112 2101	0 0							
Class of shares (ordinary or preference etc)	ORDINARY								
Number allotted	1								
Nominal value of each share	LI								
Amount (if any) paid or due on eac share (including any share premium)	h 1								
List the names and addresses of th	e allottees and the number of si	nares allotted to each overl	eaf						
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°/0								
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)									



A11 MACAG COMPANIES HOUSE 18/01/01 . Form revised January 2000

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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

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

DX 235 Edinburgh

A addresses of the allottees (List joint share allotments consecutively) Shares and share class allotted Shareholder details Class of shares Number allotted allotted _{ress} UK Postcode _ _ _ _ _ _ _ _ _ Class of shares Number Name SIMON CHARLES ROBERT BARTON allotted allotted Address TOP FLOOR II HARGRAVE ROAD ARHWAY LOCUE UK Postcode N. 19, 5,5 il Name Class of shares Number allotted allotted Address UK Postcode Name Class of shares Number allotted allotted Address UK Postcode Name Class of shares Number allotted allotted Address UK Postcode Please enter the number of continuation sheets (if any) attached to this form Signed A director / secretary / administrator / administrative receiver / receiver manager / receiver Please delete as appropriate 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. Tel

DX number

DX exchange