Return of Allotment of Shares

CHFPO83		
Company Number	3716736	
Company name in full	ISOFT GROUP PLC	
Shares allotted (including bonu	s shares):	
	From	То
Date or period during which shares were allotted	Day Month Year	Day Month Year
(If shares were allotted on one date enter that date in the "from" box.)	2 1 0 8 2 0 0 3	
Class of shares (ordinary or preference etc)	Ordinary 20,000	
Number allotted	10p	
Nominal value of each share		
Amount (if any) paid or due on each share (including any share premium)		
List the names and addresses of th	he allottees and the number of shares a	illotted to each overleaf
If the allotted shares are fully or	partly paid up otherwise than in ca	sh 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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COMPANIES HOUSE 30/09/03

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

For companies registered in England and Wales

Companies House, Crown Way, Cardiff CF14 3UZ

DX 33050 Cardiff

DX235 Edinburgh

Names and addresses of the allottees	(List joint share allotments consecutive	rely)
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Shareholder details	Shares and share	Shares and share class allotte	
Name Mr Paul Bochhorn	Class of shares allotted	Number allotted	
Address 8 Yarranabbe St, Mt Gravatt East 4122	Ordinary	20,000	
Queensland, Australia	_	l	
UK Postcode	 		
Name	Class of shares allotted	Number allotted	
Address	_	L	
	_		
UK Postcode		<u> </u>	
Name	Class of shares allotted	Number allotted	
Address	_	1	
UK Postcode L L L L L L	<u> </u>	l	
lame	Class of shares allotted	Number allotted	
Address	_	1	
	_		
UK Postcode _ _ _ _ _ _ _ _ _	<u> </u>	<u> </u>	
Name	Class of shares allotted	Number allotted	
Address	TOTAL	20,000	
	_ 1		
Please enter the number of continuation sheet(s) (if any) attached to the	nis form :		
director / secretary / administrator / administrative receiver / receiver manager / receiver	Date	e as appropriate	
The state of the s	Troubb defet	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.

LLOYDS TSB REGISTRARS THE CAU	SEWAY
WORTHING WEST SUSSEX BN99 6	DA
ESP-EXEC./HF3232	Tel: 01903 833436
DX number DX exchange	