

for the record

**Return of Allotment of Shares** 

Please complete in typescript, or in bold black capitals. CHWP000

**Company Number** 

3899738

Company name in full

ts4me plc	*		 	

## 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)

From	То
Day Month Year	Day Month Year
3 0 1 2 2 0 0 2	

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)

Cumulative Preference		ļ	· · · · · · · · · · · · · · · · · · ·	
150000				
£1				-
£1		i		

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			

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:

07/08/08

COMPANIES HOUSE

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

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

Shareholder details	Shares and share class allotted		
Name MMA Insurance pic	Class of shares allotted	Number allotted	
Address Norman House	Cum Preference	150,000	
Reading			
UK Postcode RG1 8 DA	-	L	
Name	Class of shares allotted	Number allotted	
Address			
		L	
UK Postcode	<u> </u>		
Name	Class of shares allotted	Number allotted	
Address	}		
	_	L	
UK Postcode :	L	L	
Name	Class of shares allotted	Number allotted	
Address		·	
		<u> </u>	
UK Postcode			
Name	Class of shares allotted	Number allotted	
Address			
L	_	L	
UK Postcode	L		
Please enter the number of continuation sheets (if any) attached to this	s form		
signed ruh Swelli D	ate6/3	/2 <u>001</u>	
A director / secretary / administrator / administrative receiver / receiver manager / rec	etver Please	delete as appropriat	

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.

Richard Savelli, its	s4me House, Rosary
Road, Norwich N	· · · · · · · · · · · · · · · · · · ·
	Tel 01603 221013
DX number	DX exchange