

Shares allotted (including bonus shares):

## 88(2) Return of Allotment of Shares

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

**Company Number** 

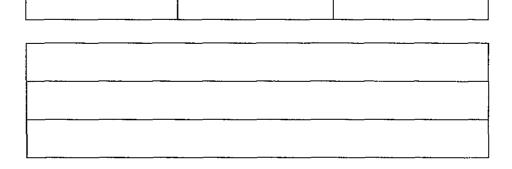
Company name in full

03904260			,
BRANCASTER	SAND LIMITED		

	From	lo lo
Date or period during which shares were allotted (If shares were allotted on one date enter that date in the "from" box)	Day Month Yea	
Class of shares (ordinary or preference etc)	ORPIAMAY	
Number allotted	100	
Nominal value of each share	11.00	
Amount (if any) paid or due on each share (including any share premium)	11.00	
List the names and addresses of the allot	tees and the number of sh	ares allotted to each overleaf
If the allotted shares are fully or pa	artly 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)





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

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

DX 235 Edinburgh

DX 33050 Cardiff

Names and addresses of the allottees	(List joint share allotments consecutively)
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Shareholder details	Shares and share	class allotte
Name ROBERT MANK WAIGHT	Class of shares allotted	Number allotted
Address Augusta Oursean Annual Kore (Manual Cores)	Octobrasia	100
MILL HOUSE, PLINGSTEAD LOND, HEACHAM, KINGS LYWN,	ORDINARY	<u> 100 </u>
UK Postcode PEZL7HZ	L	
Name	Class of shares allotted	Number allotted
Address		
L		L
UK Postcode		
Name	Class of shares allotted	Number allotted
Address	-	
L	_	L
L		L
UK Postcode	L	
Name .	Class of shares allotted	Number allotted
Address	-	
L		L
UK Postcode		1
	Class of shares	NI. mala a
Name	Class of shares allotted	Number allotted
Address	-	
L	.	
<u>L</u>		
UK Postcode		
Please enter the number of continuation sheets (if any) attached to this	form	
Signed > Da	te <u>20 march 2003</u>	
A director / secretary / administrator / administrative receiver y receiver manager / receiver	iver Please de	elete 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.

WHEELERS, 16	NONTH STACET WIS	BECH, CAMBS
PER INE.		
	Tel	01945 582547
OX number	DX exchange	