

Package: 'Laserform'
by Laserform International Ltd.

88(2)

Return of Allotment of Shares

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

CHFP025

Company Number

3928167

Company name in full

CCH (H) LIMITED

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

To

Day Month Year

Day Month Year

1	4	0	8	2	0	0	0
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Class of shares

(ordinary or preference etc)

ORDINARY

Number allotted

228

Nominal value of each share

£1

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

£1

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)*

**When you have completed and signed the form please send
it to the Registrar of Companies at:**

Companies House, Crown Way, Cardiff, CF14 3UZ DX 33050 Cardiff
For companies registered in England and Wales

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB
For companies registered in Scotland DX 235 Edinburgh

Cc



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

Shareholder details		Shares and share class allotted	
Name AMEY VENTURES LIMITED		Class of shares allotted ORDINARY	Number allotted 228
Address SUTTON COURTNEY, ABINGDON, OXFORDSHIRE			
UK Postcode 0 X 1 4 4 P P			
Name 		Class of shares allotted 	Number allotted
Address 			
UK Postcode			
Name 		Class of shares allotted 	Number allotted
Address 			
UK Postcode			
Name 		Class of shares allotted 	Number allotted
Address 			
UK Postcode			
Name 		Class of shares allotted 	Number allotted
Address 			
UK Postcode			

Please enter the number of continuation sheets (if any) attached to this form

Signed

C. M. Kenna

Date

14/08/2000

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.

CMS Cameron McKenna

Mitre House, 160 Aldersgate Street, London, EC1A 4DD

Ref: 51621951

Tel 020 7367 3000

DX number 135316

DX exchange BARBICAN 2