

Return of Allotment of Shares

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

100

Company Number

3955622

Company name in full

ORTHOPAEDICS AND SPINE SPECIALITY

CLINIC LIMITED

Date or period during which shares were allotted (If shares were allotted on one date enter that date in the "from" box)

	LIO	ŧi .		10	
Day	Month	Year	Day	Month	Year
2,3	0,5	2,0,0,3		1	1 1 1

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)

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ORDINAFIY		
99998 99999	<b>V</b>	
£1.00		
£1.00		

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)

100%			
CASH	 <u> </u>		
			_



COMPANIES HOUSE

\*A0BLYQ0U\* **COMPANIES HOUSE** Form Revised January 2000

03/12/03

13/11/03

0327

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

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

Shareholder details	Shares and share	Shares and share class allotted		
Name AHMED SHAIR		Class of shares allotted	Number allotted	
Address			9499	
AL-KAUTHAR, 244A THORPE ROAD, PETERB	HOUCHO	ORDINARY	99998 fu	
CAMBS			L	
UK Postcode	PE3 6 L V	v L	<u> </u>	
Name		Class of shares allotted	Number allotted	
Address				
UK Postcode	<u> </u>	_	<u> </u>	
Name		Class of shares allotted	Number allotted	
Address				
UK Postcode		L		
Name		Class of shares allotted	Number allotted	
Address				
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UK Postcode		_	- L.	
Name		Class of shares allotted	Number allotted	
Address				
			<u>,</u>	
UK Postcode	3		_	
Please enter the number of continuation s	heets (if any) attached	to this form		
2.4		. \ \	J	
A director / secretary / administrator / administrat	live receiver / receiver mans	Date 0 1 6	se delete as appropriat	
Please give the name, address				
telephone number and, if available, $\varrho$	STREETS			
a DX number and Exchange of the Chartered Accountants person Companies House should Towar House, Lucy Towar Street				
contact if there is any query.	LINC	OLN. LN1 1XW Tel OLSO	5 22/500	
) <u>-</u>	X number	DX exchange	-6 331200	