

for the record

88(2)

Return of Allotment of Shares

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

Company Number

Company name in ful	Com	pany	name	in	ful
---------------------	-----	------	------	----	-----

3978346.			
FFASTFILL PLC.	 		
	 <u> </u>	<u> </u>	

Shares allotted (including bor	nus shares):	
Date or period during which shares were allotted (If shares were allotted on one date enter that date in the "from" box)	From Day Month Yes 3 0 0 3 2 0	
Class of shares (ordinary or preference etc)	Ordinary.	
Number allotted	400,000.	
Nominal value of each share	1p.	
Amount (if any) paid or due on each share (including any share premium)	th 4p.	
List the names and addresses of th	e allottees and the number of sh	ares allotted to each overleaf
If the allotted shares are fully	or partly paid up otherwise	e 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

DX 33050 Cardiff



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

DX 235 Edinburgh or LP - 4 Edinburgh 2

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

Shareholder details	Shares and share	class allotted
Name Laurent Morfoisse.	Class of shares allotted	Number allotted
Address 98 rue de Silly. 92,00 Boulogne. France.	ORDINARY	400,000
UK Postcode		
Name	Class of shares allotted	Number allotted
Address		
		L
UK Postcode	L	L
Name	Class of shares allotted	Number allotted
Address		
		L
UK Postcode டடடடட		L
Name	Class of shares allotted	Number allotted
Address		
		L
UK Postcode	<u> </u>	L
Name	Class of shares allotted	Number allotted
Address		
		L
UK Postcode		
Please enter the number of continuation sheets (if any) attached to this	form	-
	te <u>24/3/04</u> .	
A director / secretary / administrator / administrative receiver / receiver manager / rece	iver Please c	lelete as appropriate

You do not have to give any contact information in the box opposite but if you do, it will help Companies House to contact you if there is a query on the form. The contact information that you give will be visible to searchers of the public record.

P COLCOMBE,	FFASTFILL P.	C	
10 ARTMUR S	TREET		
NOWOON	Tel	020	7665 8900
DX number	DX exchange	_	