

Return of Allotment of Shares

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

**Company Number** 

4059604

Company name in full	FREELANCE MEDIA 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  3 0 0 7 2 0 0 3			
Class of shares (ordinary or preference etc)	ORDINARY			
Number allotted	59			
Nominal value of each share	ONE PENCE			
Amount (if any) paid or due on each share (including any share premium)	ch £291.48			
List the names and addresses of th	e 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 send it to the Registrar of Companies at:

COMPANIES HOUSE

30/08/03

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

DX 33050 Cardiff

DX 235

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

Edinburgh

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

Shareholder details	Shares and share class allotted	
Name Summit Alpha Limited	Class of shares allotted	Number allotted
Address		
Craigmuir Chambers, PO Box 71, Road Town	Ordinary	
Tortola, British Virgin Islands	_	
UK Postcode	<u> </u>	L
Name L	Class of shares allotted	Number allotted
Address		
	_	
UK Postcode		<u> </u>
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Name	Class of shares allotted	Number allotted
Address		
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	_	
UK Postcode		
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		<u> </u>
Please enter the number of continuation sheets (if any) attached to this	form 0	
Signed \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	nte 3.5 Ju	17 2007
A director / secretary / administrator / administrative receiver / receiver manager / receiver	<del>pivo</del> r Please o	delete as appropriate
Please give the name, address,		

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.

Fox Hayes		
Bank House, 150 Roundhay Road		
Leeds LS8 5LD	Tel 0113 2496496	
DX number 716760	DX exchange Leeds 37	