

Please complete in typescript, or in bold black capitals CHFP029

88(2)

Return of Allotment of Shares

Company Number	4080197 Quadrant Housewares Limited		
Company name in full			
Shares allotted (including b	onus 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 Year 2 3 1 0 2 0 0 0	To Day Month Year	
Class of shares (ordinary or preference etc)	Ord £1 Shares		
Number allotted	1		
Nominal value of each share	£ 1.00		
Amount (if any) paid or due on each share (including any share premium)	£ 1.00		
List the names and addresses of t	he allottees and the number of shares allotte	d to each overleaf	
f the allotted shares are full	y or partly paid up otherwise than in o	ash 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)			



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 DX 235 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 ZANT-BOER, IAN	Class of shares allotted	Number allotted
Address		
PARK HOUSE, UPTON, NORTHAMPTON, NORTHAMPTONSHIRE, ENGLAND	Ord £1 Shares	1
UK Postcode LN LN 5 L 4 LU LX	L	
lame	Class of shares allotted	Number allotted
Address		
III/ D. A. A.	- L	
UK Postcode LLLLLL		
Name	Class of shares allotted	Number allotted
Address		
UK Postcode	L	
Name	Class of shares allotted	Number allotted
Address		
UK Postcode ∟ ∟ ∟ ∟ ∟ ∟		
Name	Class of shares	Number
Address	_ allotted	allotted
UK Postcode		
Please enter the number of continuation sheets (if any) attached to this	form	
igned FOR AND ON BEHALF OF EMW DIRECTORS LIMITED	Date 23.10.2000)
A director / secre any badministrator / administrative receiver / receiver manager / receiver	er 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.

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\$OLF// URS	
\$ECKLOE HOUSE	Tel 01908 EIIIWiaw
101 NORTH 13TH STREET	Tel 31908 CMW law DX 54473 MILTON KEYNES 1
CENTRAL MILETON KEYNES	DX exchange