Package:

'Laserform'

by Laserform International Ltd.

Please complete in typescript, or in bold black capitals.



company Number	4093899 HO98338			
ompany name in full	Luxury Family Hotels Five Plc			
hares allotted (including bo	nus shares):			
	From	То		
ate or period during which hares were allotted	Day Month Year	Day Month Year		
f shares were allotted on one date nter that date in the "from" box)	2 6 0 4 2 0 0 1			
lass of shares rdinary or preference etc)	Ordinary			
umber allotted	1,000			
lominal value of each share	£0.50			
mount (if any) paid or due on each hare (including any share premium)				
ist the names and addresses of t	the allottees and the number of shares allo	otted to each overleaf		
the allotted shares are fully	or partly paid up otherwise than in	cash please state:		
% that each share is to be reated as paid up	100			
Consideration for which ne shares were allotted	£900 in lieu of underwriti	£900 in lieu of underwriting commission		
This information must be supported by ne duly stamped contract or by the duly tamped particulars on Form 88(3) if the				
contract is not in writing)				



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

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

Laserform International 02/00

Shareholder details		Shares and share class allotted	
Name		Class of shares	Number
William Russell		allotted	allotted
Address			
Thriplow Bury, Thriplow Roys	ton, Herts	Ordinary	1,000
·			
UK P	Postcode <u>S G 8 _ 7 R N</u>	L	_
Name		Class of shares	Number
<u>L</u>		allotted	allotted
Address		_	
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1			
? LIK P	Postcode		- L
	ostcode LLLLLL		
Name		Class of shares allotted	Number allotted
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Address			
		_   ـ	
UK P	Postcode	L	
Name		Class of shares	Number
l		allotted	allotted
Address		_	
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1			
UK P	Postcode		
		Class of charge	Numbar
Name		Class of shares allotted	Number allotted
*		-	
Address			
		_ \	
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UK P	Postcode	L	
Please enter the number of continu	uation sheets (if any) attached to this	form	
		01/1/21	
Signed	Da	te 31/5/01	
A director / secretary / administrator / ac	dministrative receiver / receiver manager / rec	eiver Please o	delete as appropria
Please give the name, address,	Mills & Reeve		
elephone nymber and, if available,	LITTID & VCC.C		
a DX numbér and Exchange of the person Companies House should	Francis House, 112 Hill	s Road, Cambridge	CB2 1PH
contact if there is any query.		Tel 01223 36	54422
	DX number DX: 122891	DX exchange Cambrid	ae 4
	DX Harriber 24.	DA CAGINING CAMBETS	.5 -