

## 88(2) Return of Allotment of Shares

Please complete in typescript, or in bold black capitals.
CHFP000

**Company Number** 

Company name in full

4134749		7
(HESTMUT BAY	Limites	

Shares allotted (including bonus	shares):		
•	From	То	
Date or period during which	Day Month Year	Day Month Year	
shares were allotted (If shares were allotted on one date enter that date in the "from" box)	30072003		
Class of shares (ordinary or preference etc)	A Shaws		
Number allotted	25.000		
Nominal value of each share	11.00		
Amount (if any) paid or due on each share (including any share premium)	\$ 1,25		
List the names and addresses of the allo	ottees and the number of shares allot	ted to each overleaf	
If the allotted shares are fully or p	eartly 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			



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

For companies registered in England and wates

For companies registered in Scotland

Companies House, 37 Castle Terrace, Edinburgh EH1 2EB

DX 235 Edinburgh

contract is not in writing)

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

Shareholder details	Shares and share class allotted	
Name   Abort Address   Abort	Class of shares allotted	Number allotted
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DUTHFICLD LONDON	_	L
UK Postcode Swith 55 H	L	L
Name	Class of shares allotted	Number allotted
Address		
	_	L
UK Postcode L L L L L	L	
Name	Class of shares allotted	Number allotted
Address	-	
		<u> </u>
UK Postcode	L	L
Name	Class of shares allotted	Number allotted
Address	:	
	_   1	L
UK Postcode		
Name	Class of shares allotted	Number allotted
Address	-	
	_	<u> </u>
UK Postcode	<b>L</b>	L
Please enter the number of continuation sheets (if any) attached to this	form	
Signed Da	ate 14/9/03	
A director / sec <del>ret</del> ary / adm <del>inistrator / administrative receiver / receiver manager / rece</del>	<del>liv</del> er <i>Please</i>	delete as appropriate
Please give the name, address, telephone number and, if available, a DX number and Exchange of the	ORBITAL HOUSE	
contact if there is any query.    ARK VIEW   A DETERMINED TO THE PLANT OF THE PLANT	LKHAMSTEN Tel OIHH)	- 2000bo

DX number

DX exchange