

88(2)
Return of Allotment of Shares

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

Company Number	04202047			
Company name in full	GENVAX LIMITED			
Shares allotted (including bonus shares):				
	From To			
Date or period during which shares were allotted (If shares were allotted on one date enter that date in the "from" box)	Day Month Year Day Month Year 0 5 1 1 2 0 0 8			
Class of shares (ordinary or preference etc)	ORDINARY			
Number allotted	450			
Nominal value of each share	10p			
Amount (if any) paid or due on each share (including any share premium)	ch £150			
List the names and addresses of the 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, Crown Way, Cardiff CF14 3UZ For companies registered in England and Wales

For companies registered in Scotland

DX 33050 Cardiff

Companies House, 37 Castle Terrace, Edinburgh EH1 2EB

DX 235 Edinburgh



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A13 07/11/2008

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

Shareholder details	Shares and share	class allotted
Name Medical Marketing International Group pl	Class of shares allotted	Number allotted
Address The Bioscience Innovation Centre, Cowley Road	ORDINARY	_, 450
Cambridge		
UK Postcode CB4 0DS		
Name	Class of shares allotted	Number allotted
Address	_	
	_	L
UK Postcode LLLLLL		<u> </u>
Name	Class of shares allotted	Number allotted
Address		
	_	<u> </u>
, UK Postcode L L L L L		
Name	Class of shares allotted	Number allotted
Address	_	
	_	<u> </u>
UK Postcode LLLLL		<u> </u>
Name	Class of shares allotted	Number allotted
Address	_	
UK Postcode しこしにした		
Please enter the number of continuation sheets (if any) attached to this	s form	-
gned	Date 5 11 08	
A director / secretary / administrator / administrative receiver / receiver manager / rec	Please	delete as appropriate
ease give the name, address,	- Dianeiros I	4:
ephone number and, if available, OX number and Exchange of the		<u>inovation</u>
X number and Exchange of the son Companies House should Centre, Cowley Ro		-

contact if there is any query

Rob Sprawson	The Bioscience Innovation	
Centre, Cowley	Road,	
Cambridge	Tel 01223 477677	
DX number	DX exchange	