'Laserform' Package: by Laserform International Ltd. 288a

Please complete in typescript,

Appointment of director or secretary

or in bold black capitals.		of particulars (use Form 288c))		e
CHFP025	Company Number	4217756		
Company Name in full		Jonix Pharmace	uticals Lin	nited
	Date of appointment	Day Month Year 2 8 0 3 2 0 0 3	†Date of Birth	ay Month Year
Appointment Appointment as d form		as secretary)		ppropriate box. If appointment d secretary mark both boxes.
	NAME *Style / Title	*	'Honours etc	
Notes on completion appear on reverse.	Forename(s)			
	Surname	EVERSECRETARY	LIMITED	
Previous Forename(s)		Previous Surname(s)		
	Usual residential address	CI EVERNICOS		LIE, STATION ROAD
Post town		CAMBRIDGE	Postcode	CBI 2TY
County / Region		CAMBRIOGESHIRE	Country	ENGLAND
†Nationality †Other directorships (additional space overleaf)		/ tBusin	ness occupation	
		1	-/ secretary of th	e above named company
* Voluntary details † Directors only. **Please delete as	(A director, secretary etc must		28/03/03
1 10030 Q31010 QX	Signed	ODL	Date	28/02/03
telephone num a DX numbe	the name, address, aber and, if available, r and Exchange of apanies House should is any query.		el 01223 44366 X exchange Camb	6

COMPANIES HOUSE

08/04/03

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When you have completed and signed the form please send it to 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 for companies registered in Scotland

DX 235 Edinburgh