

88(2) Return of Allotment of Shares

To

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

Company Number

Company name in full

4225	125_	

From

		 J		
INFORTE	670			
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Shares allotted (including bonus shares):

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
310	0 15	2001			

Class	of	shar	es	
(ordina	ry o	r prei	ference	etc)

Number allotted

Nominal value of each share

Amount (if any) paid or due on each share (including any share premium)

ORDINARY	
2	
£1	
£1	

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

1/4

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)

1/4.		 		

When you have completed and signed the form send it to the Registrar of Companies at:



A44 _____COMPANIE\$ H0U\$E

Form revised January 2000

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0452 28/06/01 Companies House, Crown Way, Cardiff CF14 3UZ For companies registered in England and Wales DX 33050 Cardiff

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)

Name	01	
	Class of shares	Number
MR SIRAI MONNES	allotted	allotted
Address		
BLACKAURY LANCALHAR	ORDINARY	_2
BLACKAURN LANCAIHAR	_	<u> </u>
UK Postcode டிடிட்ட டிடி	<u> </u>	
Name	Class of shares allotted	Number allotted
Address		
UK Postcode		L
Name	Class of shares allotted	Number allotted
Address	-	
	<u> </u>	
UK Postcode		<u> </u>
Name	Class of shares allotted	Number allotted
Address		
<u></u>	_	L
UK Postcode		
Name	Class of shares allotted	Number allotted
Address	-	
<u> </u>	_	—— .
UK Postcode L L L L L L		
Please enter the number of continuation sheets (if any) attached to this	form	
sind 8 Hab	ate _30/05/2001	
A director / secretary / administrator / administrative receiver / receiver manager / receiver		delete 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.

SIRAT MOHITA	z	
31 LEAMINGT	and Road BL.	ACKBURN
. /	•	Tel 0780/ 523442.
DX number		change