



Companies House
— for the record —

88(2)

Return of Allotment of Shares

Please complete in typescript, or
in bold black capitals.

CHFP000

Company Number

4289858

Company name in full

LIGHTERLIFE LTD

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)

From

To

Day Month Year

Day Month Year

08 09 2005

08 09 2005

Class of shares
(ordinary or preference etc)

ORDINARY

Number allotted

1

Nominal value of each share

£1

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

£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

100%

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)

CASH

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

Companies House, 37 Castle Terrace, Edinburgh EH1 2EB
For companies registered in Scotland

DX 235
Edinburgh



A32
COMPANIES HOUSE
0027
10/09/05

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

Shareholder details		Shares and share class allotted	
Name DAR HEWETT		Class of shares allotted ORDINARY	Number allotted 1
Address 30 Watbury Rise HARLOW, Essex			
UK Postcode CM17 9NS			
Name		Class of shares allotted	Number allotted
Address			
UK Postcode	LLLLLLLL		
Name		Class of shares allotted	Number allotted
Address			
UK Postcode	LLLLLLLL		
Name		Class of shares allotted	Number allotted
Address			
UK Postcode	LLLLLLLL		
Name		Class of shares allotted	Number allotted
Address			
UK Postcode	LLLLLLLL		

Please enter the number of continuation sheets (if any) attached to this form

☐

Signed

[Signature]

Date

8/9/05

A director / secretary / administrator / administrative receiver / receiver manager / receiver

Please delete as appropriate

Please give the name, address, telephone number and, if available, DX number and Exchange of the person Companies House should contact if there is any query.

825 HIGH ST	
JAWSTON, CAMB	
CB2 4HJ	Tel
DX number	DX exchange