

Please complete in typescript,

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or in bold black capitals.
CHFP001

Company Number							
Company name in full	MEDICAL DEVICE INNOVATIONS LIMITED						
							
Shares allotted (including bonus	shares):						
		From		m	То		
Date or period during which shares were allotted		Day	Month	Year	Day	Month Year	
(If shares were allotted on one date enter that date in the "from" box)		11	0,1	2,0,0,1			
	F						
Class of shares (ordinary or preference etc)		Ordina	ry				
Number allotted	}	74					
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	e allottees a	and the n	ımber of	shares allotted	d to each o	verleaf	
If the allotted shares are fully	or partly	paid up	otherw	ise than in c	ash plea	se state:	
% that each share is to be treated as paid up							
	·						

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COMPANIES HOUSE COMPANIES HOUSE

12/02/02 02/02/02 When you have completed and signed the form 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 DX 235 For companies registered in Scotland Edinburgh

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)

Number allotted
49
Number allotted
25
Number allotted
Number allotted
<u> </u>
Number allotted
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40 4400 ry Lane
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