

Return of Allotment of Shares

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

Company Number

4362675

Company name in full	1110 KONT BREAKERS LINITED				
]		
			<u> </u>		
Shares allotted (including bonus shares):					
	From	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)	290120012	2901120012			
Class of shares (ordinary or preference etc)	BRDINARY]		
Number allotted	99				
Nominal value of each share	£1				
Amount (if any) paid or due on each share (including any share premium)	h L'				
List the names and addresses of the	e allottees and the number of shares allot	ted 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)	CASH				
			_		

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

A40 COMPANIES HOUSE

01/06/02

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)

Shareholder details	Shares and share c	lass allotte
Name JOHN POWER	Class of shares allotted	Number allotted
Address 10c WHITE HALL LANG	ORDINATU	90
ERITH		
Kow UK Postcode DB8 21	H	<u> </u>
Name	Class of shares allotted	Number allotted
Address		· •
UK Postcode		
Name	Class of shares allotted	Number allotted
Address		
UK Postcode	_ L	<u> </u>
Name	Class of shares allotted	Number allotted
Address		
UK Postcode 👅 ू ू ू ू ू ू		
Name	Class of shares allotted	Number allotted
Address		
		L
UK Postcode		t
Please enter the number of continuation sheets (if any) attache		
gned Mass	Date29.01.02_	1
A director/secretary / administrator / administrative receiver / receiver man	ager / receiver Please dele	te 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.

Neikonzios			
14-16 STATION ROOD WOST			
DXY6D SURREBY	RH896P Tel 01883-717077		
DX number	DX exchange		