

Return of Allotment of Shares

Please complete in typescript, or in bold black capitals **CHFP029**

Company Number	4420816		
Company Name in full	EQUION HEALTHCARE HOLDINGS LIMITED		
	(named changed to Education Support (Newham) Limited		
Shares allotted (including bon	us 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 0 8 0 4 2 0 0 3		
Class of shares (ordinary or preference etc)	Ordinary £1		
Number allotted	49,999.00		
Nominal value of each share	£ 1.00		
Amount (if any) paid or due on each share (including any share premium)	£ 1.00		
List the names and addresses o	f the allottees and the number of shares allotted to each overleaf		
If the allotted shares are fully o	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)	49,999.00		



COMPANIES HOUSE

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 DX 235 Edinburgh For companies registered in Scotland

Name's and addresses of the allottees (List joint share allotments consecutively)

Shareholder details	Shares and share class allotted	
Name COASTAL CLEARWATER (HOLDINGS) HOLDINGS LIMITED	Class of shares allotted	Number allotted
Address 29 BRESSENDEN PLACE, LONDON.	Ordinary £1	49,999.00
		_
UK Postcode LS LW_1 LE L5 LE LQ		_
Name	Class of shares allotted	Number allotted
Address		
	_	_
UK Postcode LLLL		1
Name	Class of shares allotted	Number allotted
Address		ı
UK Postcode LLLL LL	1	
Name	Class of shares allotted	Number allotted
Address		
		_
UK Postcode LLLL LL		
Name	Class of shares allotted	Number allotted
Address		
UK Postcode LLLLLL	1	
Please enter the number of continuation sheets (if any) attached to this	form	
igned	Date	
A director/ secretary / administrator / administrative receiver / receiver manager / r	eesiver Please o	lelete as appropriat

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.

Susan Roye	
Laing Investments Limited, 29 Bressenden Place, LONDON, SW1E 5EQ.	
	Tel
DX number	DX exchange