

**Return of Allotment of Shares** 

Please complete in typescript,
or in bold black capitals.
CHFP001

Company Number	4604300					
Company name in full	INVICTA MORTGAGES LIMITED					
Shares allotted (including bonus shares):  From To						
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  2 9 1 1 2 0 0 2					
Class of shares (ordinary or preference etc)	Ordinary					
Number allotted	99					
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 of the a	llottees 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						
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)						
	When you have completed and signed the form send it to Registrar of Companies at:					

panies House, Crown Way, Cardiff CF14 3UZ

16/12/02 ....panies House, 37 Castle Terrace, Edinburgh EH1 2EB

ompanies registered in England and Wales

For companies registered in Scotland

DX 33050

DX 235 Edinburgh

CHAD 22/02/2000

A31 COMPANIES HOUSE

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Names and addresses of the allottees (List joint share allotment Shareholder details	Shares and share class allotted	
Name Paul Emery	Class of shares allotted	Number allotted
Address 70 Clover Rise WHITSTABLE Kent	Ordinary	49
UK Postcode CT5 3HT		L
Name Peter Gordon Emery	Class of shares allotted	Number allotted
Address  8 Dargate Road Yorkletts WHITSTABLE Kent	Ordinary	50
UK Postcode CT5 3AB		L
Name	Class of shares allotted	Number allotted
Address		L
L	_	<u> </u>
UK Postcode	<u> </u>	
Name L	Class of shares allotted	Number allotted
Address L	_	L
		L
UK Postcode		
Name	Class of shares	Number allotted

]		
	Please enter the number of continuation sheets (if any) attached to this form	
Signed	Date	29/4/02
	A director / secretary / administrator / administrative receiver / receiver manager / receiver	ver Please delete as appropriate

**UK Postcode** 

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.

P. GILES	WILLIAMS, GILES & Co CHARTURED ACCOUNTANTS	
	I CUNDUR ROAD SITTINGBOLIRNE	
	KENT ME10 1N0 TEL 01795 478044	
DX number	DX excharges 7	

Address