

Return of Allotment of Shares

То

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

Company Number

4646508

Company	name	in	full
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	 J	
/irtalis Limited		

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 Day Month Year Day Month Year 2 0,0,

Class of shares (ordinary or preference etc)

Number allotted

Nominal value of each share

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

		
A Ordinary		
28235		
£1		
£2.83		

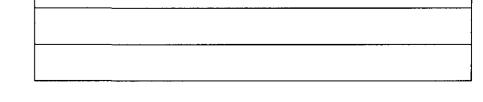
List the names and addresses of the allottees and the number of shares allotted to each overleaf

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

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 the Registrar of Companies at:

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Companies House, Crown Way, Cardiff CF14 3UZ For companies registered in England and Wales

DX 33050 Cardiff

COMPANIES HOUSE

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 cl	ass allotted
Name North West Equity Fund Limited Partnership	Class of shares allotted	Number allotted
Address Wellington House, 31 - 34 Waterloo Street, Birmingham	A Ordinary Shares	28, 235
UK Postcode B 2 5 T J	L	L
Name	Class of shares allotted	Number allotted
Address		
UK Postcode	L	L
Name	Class of shares allotted	Number allotted
Address		L
UK Postcode		L
Name .	Class of shares allotted	Number allotted
Address		
UK Postcode		
Name	Class of shares allotted	Number allotted
Address		
	L	<u> </u>
UK Postcode LLLLL		
Please enter the number of continuation sheets (if any) attached to this f	orm	
Signed Signed Date	e 9th February	2004
A director / secretary / administrator / administrative receiver / receiver manager / receiver	ver Please del	ete 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.

Rowe Cohen (R	ef: EL) Quay House, Quay
Street, Manches	
	Tel 0161 830 4610
DX number 14352	DX exchange MCR - 1