

88(2) Return of Allotment of Shares

Please complete in typescript, or in bold black capitals. CHFP000

Company Number

5207041

Company name i	in	full
----------------	----	------

LAUREL INTERIOR JYSTEMS LINITED

Shares allotted (including bonus	shares):			
	From		То	
Date or period during which	Day Month Year		Day Month Year	
shares were allotted (If shares were allotted on one date enter that date in the "from" box)				
Class of shares (ordinary or preference etc)	OROINARY			
Number allotted	98			
Nominal value of each share	₹ 1-00			
Amount (if any) paid or due on each share (including any share premium)	£98-∞			
List the names and addresses of the all	ottees and the number of	shares allot	ted to each over	leaf
if the allotted shares are fully or	partly paid up otherwi	se 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 comp the Registrar of Com Companies House, Crow	panies at:	_	orm send it to DX 33050 Cardiff





A55 26/03/2008 COMPANIES HOUSE Companies House, Crown Way, Cardiff CF14 3UZ For companies registered in England and Wales

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	class allotte
Name COLIN MICHAEL SYRETT	Class of shares allotted	Number allotted
Address 2 HOLMOAKS, MAIOSTONE, MENT	ORDINARY	74
UK Postcode ME145RG		
Name DIANE WINIFRED SYRETT	Class of shares allotted	Number allotted
Address 2 HOLMOANS MAIOSTONE, WENT	ORDIAMY	24
UK Postcode MEI 4 5 R Q	L	
Name	Class of shares allotted	Number allotted
Address	_ L	<u> </u>
UK Postcode		L
Name	Class of shares allotted	Number allotted
Address	_	t
UK Postcode		L
Name	Class of shares allotted	Number allotted
Address		
UK Postcode		L
Please enter the number of continuation sheets (if any) attached to this	s form	
Signed Sursyrett D	Pate17/3/08	
A director / secretary / administrator / administrative receiver / receiver manager / rec	cerve r Please o	delete as appropriat
Please give the name, address, telephone number and, if available, a DX number and Exchange of the person Companies House should	410170NE WEN-	7

contact if there is any query

MR N.C BROW	1	
4 HOLMOAHS	MANSTONE	MENT
MEIH SRG	Tel	01612 683370
DX number	DX exchange	