

Return of Allotment of Shares

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

Company Number

5364136	
ulteriol design# Lts	

Campana					
Company name in full	ulteriol design its				
Shares allotted (including bor	nus shares):				
Date or period during which shares were allotted	From To Day Month Year Day Month Year				
(If shares were allotted on one date enter that date in the "from" box)	1140122101015				
Class of shares (ordinary or preference etc)	CRDINARY				
Number allotted	2				
Nominal value of each share	Ł i				
Amount (if any) paid or due on each share (including any share premium)	h				
List the names and addresses of th	e 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)					
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A21 COMPANIES HOUSE RAY COMPANIES HOUSE

27/04/05 24/02/05 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 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 allotted		
Name Dori AN LOVAH	Class of shares allotted	Number allotted	
Address 6 VINCE COVRT BRUNSWICK PLACE	ORDINARY		
ronden		L	
UK Postcode NIL 6 E A			
Name ALISON KAN	Class of shares allotted	Number allotted	
Address 6 VINCE COURT BRUNSWICK PLACE	ORDINARY		
London,		L	
UK Postcode LNL 6 E.A.	L	L	
Name	Class of shares allotted	Number allotted	
Address			
UK Postcode			
Name	Class of shares allotted	Number allotted	
Address			
		L	
UK Postcode	L		
Name ,	Class of shares allotted	Number allotted	
Address	-	·	
	· - L	L	
	L	<u></u>	
UK Postcode	<u> </u>	L	
Please enter the number of continuation sheets (if any) attached to this	form O	***************************************	
Signed Da	te 22.02.05.		
A director / secretary / administrator / administrative receiver / receiver manager / rece		ete as appropriate	
Please give the name, address, telephone number and if available Doram Lovan	6 VINCE COURT		

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.

DORIAN	iongu	6 VW	sce c	ourt		-
BRUNSWIC	K PI	松邑				
London	NI	GEA .	Tel	000	7250	3507
DX number		DX ex	change			