



88(2)

Return of Allotment of Shares

CHFP096

Company Number

5406722

Company Name in full

FORM CREATIONS 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

To

Day Month Year

Day Month Year

29 03 2005

Class of shares

(ordinary or preference etc)

ORDINARY

Number allotted

99

Nominal value of each share

£1

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

£1

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

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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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When you have completed and signed the form send it to the Registrar of Companies at:

Companies House, Crown Way, Cardiff, CF14 3UZ DX 33050 Cardiff
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 allotted	
Name <u>Simon Hall</u>	Class of shares allotted <u>ORDINARY</u>	Number allotted <u>49</u>	
Address <u>29 SALFORD ROAD</u>			
UK Postcode <u>SW2 4BL</u>			
Name <u>Nikki Hall</u>	Class of shares allotted <u>ORDINARY</u>	Number allotted <u>50</u>	
Address <u>29 SALFORD ROAD</u>			
UK Postcode <u>SW2 4BL</u>			
Name _____	Class of shares allotted _____	Number allotted _____	
Address _____			
UK Postcode _____			
Name _____	Class of shares allotted _____	Number allotted _____	
Address _____			
UK Postcode _____			
Name _____	Class of shares allotted _____	Number allotted _____	
Address _____			
UK Postcode _____			
Name _____	Class of shares allotted _____	Number allotted _____	
Address _____			
UK Postcode _____			

Please enter the number of continuation sheet(s) (if any) attached to this form

Signed

[Signature]
A director / secretary / administrator / administrative receiver / receiver manager / receiver

Date

11/04/2005

Please delete 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.

Tel	
DX number	DX exchange