

for the record

Return of Allotment of Shares

Please complete in typescript, or in bold black capitals. CHWP200

Company Number

5480765

Company name in full

THE BROTHERTON GROUP 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 Day Month Year Month Year 6 10 1

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)

ORDINARY	:		· · · · ·	
200001				
£1				
£1			<u>, </u>	

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

100%

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)

SHARE EXCHANGE- SEE ATTACHED 88(3)

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

COMPANIES HOUSE

18/11/2005

Companies House, 37 Castle Terrace, Edinburgh EH1 2EB For companies registered in Scotland

Companies House, Crown Way, Cardiff CF14 3UZ

For companies registered in England and Wales

DX 33050 Cardiff

DX 235 Edinburgh

Names and addresses of the allottees (List joint share allotments consecutively)

Shareholder details	Shares and share class allotted		
Name MR. ANTHONY BROTHERTON-RATCLIFFE	Class of shares allotted	Number allotted	
Address THE OLD RECTORY, RIPE, EAST SUSSEX,	ORDINARY	200001	
UK Postcode B N 8 6 A U		L	
Name	Class of shares Number allotted allotted		
Address			
UK Postcode			
Name	Class of shares Number allotted allotted		
Address			
UK Postcode		·	
Name	Class of shares allotted	Number allotted	
Address			
UK Postcode		L	
Name	Class of shares allotted	Number allotted	
Address	_	L	
UK Postcode		L	
Please enter the number of continuation sheets (if any) attached to this	form		
Signed A director /-secretary / administrator / administrative receiver /-receiver /-rec	ate 27-6	වර delete as appropriate	
Please give the name, address, telephone number and, if available, a DX number and Exchange of the porson Companies House should		/ Ru(7 n. 17	

person Companies House should contact if there is any query.

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1,WEST	STREET,	LEWES	JUDSEX BATZNZ
			01273-476617
DX number		DX exchange	•