

88(2)

		Return of Allotment of Shares								
	nplete in typescript, black capitals.									
CHFP010.	Company Number	05568977								
	Company Name in full	Navar	Navarino Associates Limited							
Shares a	lotted (including bonus s	hares):	!							
		From				Τ	То			
Date or period during which shares were allotted (if shares were allotted on one date enter that date in the "from" box)		Day Month Year			_	Day Month Year				
		1 8	0 9 2 0	0 6	L					
Class of sha		Ordina	ıry-A							
(ordinary or preference etc)										
Number allo	otted		1,000			:		-		
Nominal va	llue of each share		£ . 00							
Amount (if any) paid or due on each share (including any share premium)			£0.00							
				1				\$		
List the na	mes and addresses of the allo	ttees and	i the number of	shares all	otted to e	ach e	overleaf			
If the allo	tted shares are fully or pa	artly pa	id up otherw	ise than	in cash	plea	ise stat	e:		
% 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)		Services								
			·							



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 DX 235 Edinburgh For companies registered in Scotland

Shareholder details		Shares and share class allotted					
Name		Class of shares allotted	Number allotted				
Warren Street Nominees Limited (0112)		1.00 Ordinary-A	1,000				
Address 37 Warren Street, London		-					
UK postcode WIT 6AD							
Name		Class of shares allotted	Number allotted				
Address							
	L 1						
UK postcode							
Name		Class of shares allotted	Number allotted				
Address	<u> </u>	<u> </u>					
UK postcode							
Name		Class of shares allotted	Number allotted				
Address	L						
/ daroos							
UK postcode							
	etinuation aboa	to (if any) attached to this form					
Signed Please enter the number of cor		Date	✓ 1 3 OCT 2006				
A director / secretary / administrator / administrator	rative receiver / re						
Please give the name, address, telephone number and, if available, a DX number and	SL Statuto	ory Services Ltd , Dx 12	23593, Regents Park 3				
Exchange of the person Companies House should contact if there is any query.			•				
		Tel					
BLUEPRINT	DX number DX exchange						