

88(2) Return of Allotment of Shares

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

Company Number

Company name in full

5809783		
EASY BEAN	LIMITED	

	EASY DEAN LIMITED			
Shares allotted (including bon	us shares):			
	From	То		
Date or period during which shares were allotted	Day Month Year	Day Month Year		
(If shares were allotted on one date enter that date in the "from" box)	0 8 0 5 2 0 0 6			
Class of shares (ordinary or preference etc)	ORDINARY			
Number allotted	प ष्प			
Nominal value of each share	€			
Amount (if any) paid or due on each share (including any share premium)	£i			
List the names and addresses of the	allottees and the number of shares allo	otted to each overleaf		
If the allotted shares are fully o	or partly paid up otherwise than i	n 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 completed and the Registrar of Companies at	-		



Form revised January 2000

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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 Christina Baskoruilla	Class of shares allotted	Number allotted			
Address					
CRANFORD NETHER COMPTON	CROINARY EL	, 999.			
SHERBOURNE DOBSET					
UK Postcode DIG LE	L				
Name	Class of shares allotted	Number allotted			
Address					
		L			
UK Postcode டடடடட					
Name	Class of shares allotted	Number allotted			
Address					
UK Postcode					
Name	Class of shares allotted	Number allotted			
Address					
		1			
UK Postcode					
Name	Class of shares allotted	Number allotted			
Address					
UK Postcode					
Please enter the number of continuation sheets (if any) attached to this for	orm	,,, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>			
Signed Dat	e 4806.				
A director / secretary / administrator / administrative receiver / receiver manager / receiver Please delete as appropriate					

Albert Goodnan

Mary Street House,

Please give the name, address, telephone number and, if available,