

Return of Allotment of Shares

Please complete in typescript, or ın bold black capitals.

581 3817	<u> </u>		
	PROTEMS	LIMITED	

Company Number Company name in full	SANHAM PROTEINS LIMITED		
Shares allotted (including bon		-	
Date or period during which shares were allotted (If shares were allotted on one date enter that date in the "from" box)	From Day Month Year 2 6 0 7 2 0 7	To Day Month Year	
Class of shares (ordinary or preference etc)	ORDINARY		
Number allotted	99		
Nominal value of each share	£ı		
Amount (if any) paid or due on each	e Li		
List the names and addresses of the	e allottees and the number of shares al	liotted 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)			

31/07/2007

COMPANIES HOUSE

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

DX 235 Edinburgh

DX 33050 Cardiff

For companies registered in England and Wales

Companies House, Crown Way, Cardiff CF14 3UZ

the Registrar of Companies at:

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

Shareholder details		Shares and share class allotted	
Name		Class of shares	Number
BANHAM POULTRY LIMITED		allotted	allotted
Address			
STATION ROAD, ATTLEBORE	ou et	ORDINARY	<u>99</u>
NORFOLK		L	L
UK Postco	de NRL72AI		
Name	,	Class of shares allotted	Number allotted
Address			
UK Postco	de LLLLLL		
Name		Class of shares allotted	Number allotted
Address			
UK Postco	de LLLLLLL		
Name		Class of shares allotted	Number allotted
Address			
UK Postco	ode LLLLL		
Name		Class of shares allotted	Number allotted
Address			
		L	
			<u> </u>
UK Postco	ode <u>LLLLLL</u>		
Please enter the number of continuation	sheets (if any) attached to this f	orm	
Signed Blithardn		e _ 26 .07 .2007	-
Adirector / secretary Ladminustrator / administrator	rative poceiver / receiver manager / receiver	Ver Please del	ete as appropriate
Please give the name, address, telephone number and, if available, a DX number and Exchange of the		ERTIFIED ACCOUNT	
person Companies House should	INGRAM HOUSE, MERID		nCH1
contact if there is any query	NR7 UTA	Tel	

DX number

DX exchange