

Please complete in typescript, or

**Return of Allotment of Shares** 

in bold black capitals. CHFP000

Company	Number
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Company name in full

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Day

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Shares	allotted	(including	honus	shares'	١.
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(see Guidance Booklet GBA6)

Date or period during which shares were allotted (If shares were allotted on one date enter that date in the "from" box)

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)

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nth	Year	Day	Month	Year

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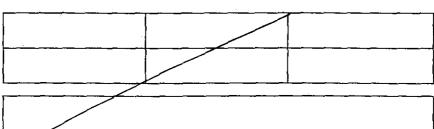
List the names and addresses of the allottees and the number and class of shares allotted to each overleaf

## If the allotted shares (including bonus shares) are fully or partly paid up otherwise than in cash please state:

% that each share is to be treated as paid up

% (if any) that each share is to be paid up in cash

Consideration for which the shares were allotted (This information must be supported by the original or a certified copy of the contract or by Form 88(3) if the contract



is not in writing)

A08

01/02/2007 **COMPANIES HOUSE**  When you have completed and signed the form please send it to the Registrar of Companies at:

Companies House, Crown Way, Cardiff, CF143UZ for companies registered in England and Wales

for companies registered in Scotland

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB DX 235 Edinburgh or LP - 4 Edinburgh 2

DX 33050 Cardiff

09/2005

## Names and addresses of the allottees

Shareholder (list joint allottees as on	Shares and share	Shares and share class allotted		
Name(s) M. C	. Thomas	Class of shares allotted	Number allotted	
Address 7 THE JE	llact	tiobs.	39.	
Romatia	-NEDI-GAR		L	
UK Post	code ~[225L7	<u> </u>	t	
Name(s)		Class of shares allotted	Number allotted	
Address				
			L	
UK Post	code <u> </u>			
Name(s)		Class of shares allotted	Number allotted	
Address			1	
UK Post	code L L L L L L L		1	
lame(s)		Class of shares allotted	Number allotted	
Address			L	
UK Post	code LLLLLL			
Name(s)		Class of shares allotted	Number allotted	
Address		<del></del>		
			L	
UK Post	code LLLLLL		L	
Please enter the number of continuation	on sheets (if any) attached to thi	s form		
gned	ra.	Date 13 - 1 - 5	57	
** A director / secretary / administrator / admi official receiver / receiver manager / volum	inistrative receiver / receiver / **	Please delete as appropriate	<del></del>	
ontact Details				
ou do not have to give any contact formation in the box opposite but if ou do, it will help Companies House to				
ontact you if there is a query on the rm. The contact information that you		Tel	<del></del>	
ive will be visible to searchers of the ublic record.	DX number	DX exchange		