RAPLACEMENT FOR FILING BATED. 13/11/2007



Please complete in typescript, or ın bold black capitals. CHWP000

Return of Allotment of Shares

Company Number

Company name in full

6400938		
Chech	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)

To From Year Month Day Month Year Day 210101

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	
250	
£0.01	
R80	

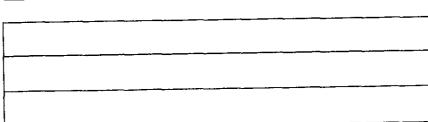
List the names and addresses of the allottees and the number of shares allotted to each overleaf

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

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)





01/02/2008 **COMPANIES HOUSE**

ode charge When you have completed and signed the form send it to the Registrar of Companies at: Companies House, Crown Way, Cardiff CF14 3UZ

DX 33050 Cardiff

For companies registered in England and Wales

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

DX 235 Edinburgh or LP - 4 Edinburgh 2

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

Shareholder deta	Shares and share class allotted		
Name SIMON LOOPUIT		Class of shares allotted	Number allotted
Address 2 ALL SAINT CLOS	E, STOCKWELL.	ordinary	250
UK Postco	ode SW& 2PW		
Name		Class of shares allotted	Number allotted
Address			
			L
UK Posto	ode L L L L		
Name		Class of shares allotted	Number allotted
Address			
			1
UK Postc	ode	<u> </u>	
Name		Class of shares allotted	Number allotted
Address			
			L
UK Posto	code LLLLLL	1	<u> </u>
Name		Class of shares allotted	Number allotted
Address			
			<u> </u>
UK Posto	code LLLLLL		1
Please enter the number of continuation	on sheets (if any) attached to this	form	
Signed		ate _ 30/51/2	
A director / secretary / administrator / admini	strative receiver / receiver manager / rec	eiver Please	delete as appropriate
You do not have to give any contact information in the box opposite but if you do, it will help Companies			
louse to contact you if there is a uery on the form. The contact		Tel	
information that you give will be visible to searchers of the public DX number		DX exchange	