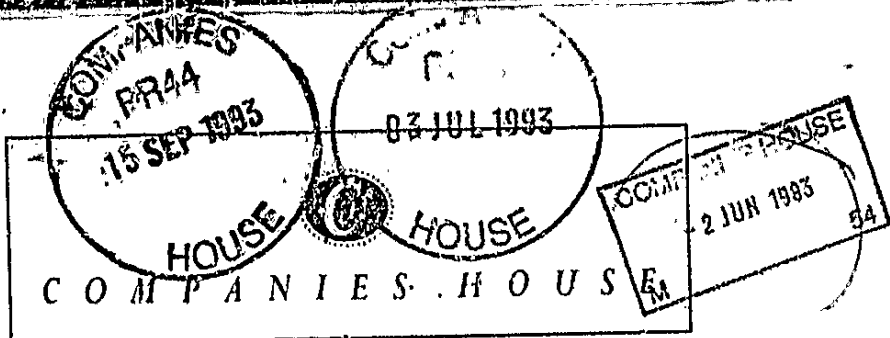




FC 007437

BR1

This form should be completed in black.

Return delivered for registration of a branch of an overseas company
(Pursuant to Schedule 21A, paragraph 1 of the Companies Act 1985)

(See note 5) Corporate name
(name in parent state)

Business name
(If different to corporate name)

Country of Incorporation

Identity of register
(If applicable)

Legal form
(See note 3)

For office use only	CN EC7432	BN BR 1786
CREDITO ITALIANO SpA.		
ITALY.		
REGISTER OF BANKING GROUPS		
and registration no. 2008.1		
X Public Company limited by shares X		

1 See note 2

PART A - COMPANY DETAILS ¹

* State whether the company is a credit or financial institution

The company is a financial institution
* Is the company subject to Section 699A of the Companies Act 1985?
X YES ☐ NO ☐ ☒

* (1) These boxes need not be completed by companies formed in EC member states *

Governing law
(See note 4)

Accounting requirements

Period for which the company is required to prepare accounts by parent law. from _____ to _____

Period allowed for the preparation and public disclosure of accounts for the above period _____ months

2470
* (2) This box need NOT be completed by companies from EC member states, *
OR where the constitutional documents of the company already show
this information.

Address of principal place of
business in home country

Objects of company

Issued share capital

~~_____~~
~~_____~~
~~_____~~
~~_____~~ Currency _____

Company Secretary(ies)
(See note 10)

Name

* Voluntary details

Address

Usual residential address must be
given. In the case of a corporation,
give the registered or principal
office address.

*Style/Title _____
Forenames GERARDO
Surname GUIDA
*Honours etc. _____
Previous Forenames _____
Previous surname _____
CREDITO ITALIANA SpA
Post town MILAN
County/Region _____
Postcode 20121 Country ITALY

Company Secretary(ies)
(See note 10)

Name

* Voluntary details

Address

Usual residential address must be
given. In the case of a corporation,
give the registered or principal
office address.

*Style/Title _____
Forenames _____
Surname _____
*Honours etc. _____
Previous Forenames _____
Previous surname _____
Post town _____
County/Region _____
Postcode _____ Country _____

(You may photocopy this page
if required)

FILE COPY



**CERTIFICATE OF REGISTRATION
OF AN OVERSEA COMPANY**

(Establishment of a branch)

Company No. FC007432

Branch No. BR001786

The Registrar of Companies for England and Wales hereby certifies that
CREDITO ITALIANO S.P.A.

has this day been registered under Schedule 21A to the Companies
Act 1985 as having established a branch in England and Wales

Given at Companies House, Cardiff, the 19th October 1993

H. G. Pell

For The Registrar Of Companies



C O M P A N I E S H O U S E

(B)

GRUPPO LONDRA

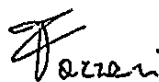
Vedere «Poteri» ed «Avvertenze» a pag. IV e IX. □ See «Powers» and «Notices» on pages V and IX. □ Voir «Pouvoirs» et «Instructions» aux pages VI et X. □ Siehe «Befugnisse» und «Anweisungen» auf Seite VII und X.

Filiale capogruppo di Londra

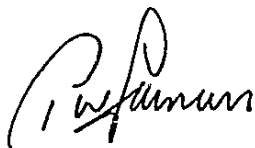
Mancini Marcello
direttore



Fazzari Maurizio
condirettore



Jarman Peter William
condirettore



Beruschi Patrizio
vice direttore



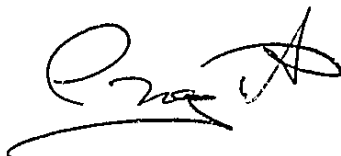
Bianchi Tiziano
vice direttore



Brown Veronica
vice direttore



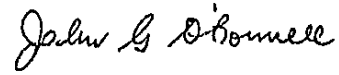
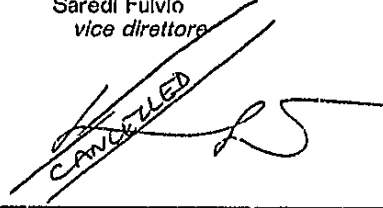
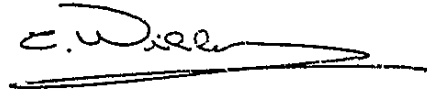
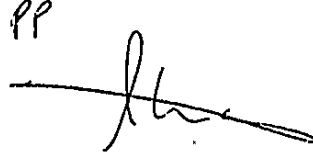
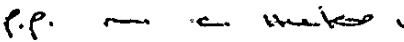
Cregut Massimo
vice direttore



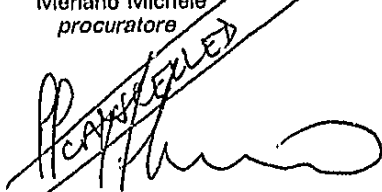
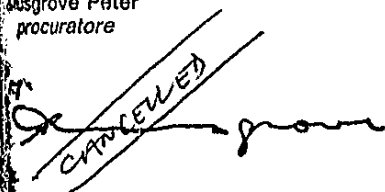
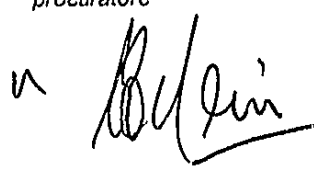
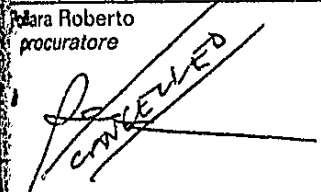
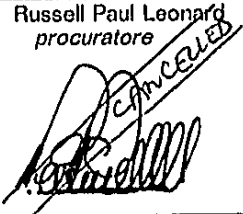
Ellwood Ronald D.
vice direttore



Filiale capogruppo di Londra

Lorenzon Roberto
vice direttoreO'Connell John G.
vice direttoreSanderson Robert G.
vice direttoreSaredi Fulvio
vice direttoreWilliams Christopher
vice direttoreCandido Salvatore
procuratoreClayton Silvana
procuratoreCleaver Stephen Paul
procuratoreHall Antony Fraser
procuratoreHicks Martin Charles
procuratoreLeuci Pasquale
procuratore

Filiale capogruppo di Londra

Saturi Carlo
procuratore~~CANCELLED~~
Merlano Michele
procuratore~~CANCELLED~~
Musgrove Peter
procuratore~~CANCELLED~~
O'Neill Cornelius Francis
procuratorePolaro Roberto
procuratore~~CANCELLED~~
Russell Paul Leonard
procuratore~~CANCELLED~~


ARTICLES OF ASSOCIATION - NO. 39

The following persons are authorized to sign jointly in the name of Credito Italiano:

- a) for the Head Office and for all Branches and Agencies: the Chairman, the Deputy Chairmen and the Managing Directors as well as the General Managers, the Deputy General Managers and any other Officers to whom such powers may have been delegated;
- b) for the Head Office only: also the Managers, Deputy Managers and Sub-Managers attached to Head Office, as well as any other Officers to whom such powers may have been delegated;
- c) for each Branch in respect of which such powers have been conferred by the Board of Directors: also the Managers, Deputy Managers, Sub-Managers and Holders of Procuration, with the restriction that Holders of Procuration may sign jointly only with an Officer of higher rank and never with another Holder of Procuration.

In order to be valid, all acts and deeds issued by the Company must bear at least two authorized signatures affixed under the style of the Company.

In order to facilitate operations, the Board of Directors may, however, authorize single or joint signature by Officers and Clerks for such acts of ordinary administration of the Company as the Board may determine.

RESOLUTION OF THE BOARD OF DIRECTORS (27th November 1984)

The Board of Directors, on the basis of the provisions of the last paragraph of Article 39 of the Articles of Association, herewith resolves:

— the following acts of ordinary administration will be considered valid for the Italian Branches only, even if bearing the signature of one Officer only, i.e. Manager, Deputy Manager, Chief Inspector, Sub-Manager, Inspector or Holder of Procuration, placed under the style of the Company:

- 1) endorsements and receipts on bills of exchange, promissory notes, postal and telegraphic money orders, cheques, circular cheques, postal cheques, certificates or scrips of Government securities, bonds, shares and provisional receipts of such securities; endorsements and receipts on deposit receipts, warrants and documents of any kind relating to goods;
 - 2) cheques and postal cheques up to a maximum amount of Lit. 250 000 000 or equivalent; circular cheques up to a maximum of Lit. 250 000 000 or equivalent;
 - 3) passbooks and interest-bearing certificates of deposit;
 - 4) policies, passbooks and similar documents relating to deposits of securities or valuables given as guarantee by the Bank, up to a maximum amount of Lit. 250 000 000 or equivalent;
 - 5) policies, passbooks and similar documents relating to securities or valuables in safe custody and for administration, or to advances on securities, valuables or goods granted by the Bank;
 - 6) contract notes (-fissati bollati-) relating to purchases and sales of securities for future delivery, as well as to forward foreign exchange transactions and contangos, up to a maximum amount of Lit. 250 000 000 or equivalent; contract notes concerning securities sold or bought for cash, with settlement through an account, up to a maximum amount of Lit. 250 000 000 or equivalent;
 - 7) ordinary or circular letters of credit and similar instruments, up to a maximum amount of Lit. 250 000 000 or equivalent;
 - 8) orders to open clean credits or similar or documentary credits and advices of clean or documentary credits to the beneficiaries, up to a maximum amount of Lit. 250 000 000 or equivalent;
 - 9) letters advising credit entries on accounts of any kind whatsoever for ordinary transactions, up to a maximum amount of Lit. 250 000 000 or equivalent, as well as, with the same limits, letters containing orders to credit or pay third parties, letters advising the issue of cheques, letters containing orders to deliver securities, bills of exchange, cheques, postal money orders or other valuables of any kind -free of value-;
- furthermore, the letters and documents mentioned hereunder are valid whether bearing a sole authorized signature or only the signature of a clerk placed under the indication "Ufficio Contabilità" or a similar one;
- 10) contract notes (-fissati bollati-) relating to cash transactions in securities, with cash settlement;
 - 11) debit advices relating to accounts of any kind;
 - 12) letters accompanying remittances of money, securities, valuables, bills and documents of any kind;
 - 13) forms relating to commercial exchange with foreign countries, sundry reports and communications of a statistical nature provided they do not contain entries or contract clauses.

With respect to the Branches established abroad, the authorized signatures are governed by the provisions contained in the first paragraph letter c) of Article 39 of the Articles of Association.



Directors

(See note 10)

Name

* Voluntary details

Address

Usual residential address must be given. In the case of a corporation, give the registered or principal office address.

SCOPE OF AUTHORITY

Give brief particulars of the extent of the powers exercised. (e.g. whether they are limited to powers expressly conferred by the instrument of appointment; or whether they are subject to express limitations.)

Where the powers are exercised jointly give the name(s) of the person(s) concerned. You may cross refer to the details of person(s) disclosed elsewhere on the form.

Mark box(es) as applicable

(You may photocopy this page as required)

*Style/Title _____

Forenames _____

Surname _____

*Honours etc. _____

Previous Forenames _____

Previous surname _____

Post town _____

County/Region _____

Postcode _____

Date of Birth

--	--	--	--	--

Country _____

Nationality _____

Business Occupation _____

Other Directorships _____

The extent of the authority to represent the company is :- (give details)

These powers :-

#

☐

May be exercised alone

#

OR

☐

Must be exercised with :-

(Give name(s) of co-authorised person(s))

Directors

(See note 10)

Name

* Voluntary details

Address

Usual residential address must be given. In the case of a corporation, give the registered or principal office address.

SCOPE OF AUTHORITY

Give brief particulars of the extent of the powers exercised. (e.g. whether they are limited to powers expressly conferred by the instrument of appointment; or whether they are subject to express limitations.)
Where the powers are exercised jointly give the name(s) of the person(s) concerned. You may cross refer to the details of person(s) disclosed elsewhere on the form.

Mark box(es) as applicable

(You may photocopy this page as required)

*Style/Title _____

Forenames _____

Surname _____

*Honours etc. _____

Previous Forenames _____

Previous surname _____

Post town _____

County/Region _____

Postcode _____

Country _____

Date of Birth

--	--	--	--	--

Nationality _____

Business Occupation _____

Other Directorships _____

The extent of the authority to represent the company is :- (give details)

These powers :-

#

☐

May be exercised alone

#

OR

☐

Must be exercised with :-

(Give name(s) of co-authorised person(s))

A

Directors

(See note 10)

Name

• Voluntary details

Address

Usual residential address must be given. In the case of a corporation, give the registered or principal office address.

SCOPE OF AUTHORITY

Give brief particulars of the extent of the powers exercised. (e.g. whether they are limited to powers expressly conferred by the instrument of appointment; or whether they are subject to express limitations.) Where the powers are exercised jointly give the name(s) of the person(s) concerned. You may cross refer to the details of person(s) disclosed elsewhere on the form.

Mark box(es) as applicable

(You may photocopy this page as required)

Presidente del Consiglio di Amministrazione
del Credito Italiano ...

*Style/Title

Forenames Natalino

Surname Irti

*Honours etc. Professore - Avvocato

Previous Forenames

Previous surname

Piazza Cordusio

Post town Milano

County/Region

Postcode 20121

Country Italia

Date of Birth

0	5	0	4	3	6
---	---	---	---	---	---

Nationality Italiana

Business Occupation Ordinario di Diritto Privato Univer-
sità La Sapienza Roma ed Avvocato

Other Directorships Nessuna

The extent of the authority to represent the company is:- (give details)

I poteri che gli derivano quale Presidente del
Consiglio di Amministrazione dal Codice Civile e
dallo Statuto Sociale del Credito Italiano

These powers :-

☒ May be exercised alone

OR

☐ Must be exercised with :-

(Give name(s) of co-authorised person(s))

Directors

(See note 10)

Name

* Voluntary details

Address

Usual residential address must be given. In the case of a corporation, give the registered or principal office address.

SCOPE OF AUTHORITY

Give brief particulars of the extent of the powers exercised. (e.g. whether they are limited to powers expressly conferred by the instrument of appointment; or whether they are subject to express limitations.) Where the powers are exercised jointly give the name(s) of the person(s) concerned. You may cross refer to the details of person(s) disclosed elsewhere on the form.

Mark box(es) as applicable

(You may photocopy this page as required)

Vice Presidente del Consiglio di Amministrazione
*Style/Title del Credito Italiano

Forenames Enrico

Surname De Mita

*Honours etc. Professore - Avvocato

Previous Forenames _____

Previous Surname _____

Via Orazio, 2

Post town Milano

County/Region _____

Postcode 20123

Country Italia

Date of Birth

0	6	0	5	3	2
---	---	---	---	---	---

Nationality Italiana

Business Occupation Ordinario di Diritto Tributario Università

Cattolica Milano ed Avvocato- Columnist del "Sole-24 Ore"

Other Directorships Nessuna

The extent of the authority to represent the company is :- (give details)

I poteri che gli derivano quale Vice Presidente del Consiglio
di Amministrazione dal Codice Civile e dallo Statuto Sociale
del Credito Italiano

These powers :-

☒ May be exercised alone

OR

☐ Must be exercised with :-

(Give name(s) of co-authorised person(s))

Directors

(See note 10)

Name

• Voluntary details

Address

Usual residential address must be given. In the case of a corporation, give the registered or principal office address.

SCOPE OF AUTHORITY

Give brief particulars of the extent of the powers exercised. (e.g. whether they are limited to powers expressly conferred by the instrument of appointment; or whether they are subject to express limitations.) Where the powers are exercised jointly give the name(s) of the person(s) concerned. You may cross refer to the details of person(s) disclosed elsewhere on the form.

Mark box(es) as applicable

(You may photocopy this page as required)

Vice Presidente del Consiglio di Amministrazione
*Style/Title del Credito Italiano

Forenames Arrigo

Surname Gattai

*Honours etc. Cavaliere di Gran Croce della Repubblica Italiana

Dottore in giurisprudenza

Previous Forenames

Previous surname

Via Fontana, 5

Post town Milano

County/Region

Postcode 20122

Country Italia

Date of Birth

1 7 0 4 2 8

Nationality Italiana

Business Occupation Avvocato

Other Directorships V. allegato

The extent of the authority to represent the company is :- (give details)

I poteri che gli derivano quale Vice Presidente del

Consiglio di Amministrazione dal Codice Civile e dallo

Statuto Sociale del Credito Italiano

These powers :-

☒ May be exercised alone

OR

☐ Must be exercised with :-

(Give name(s) of co-authorized person(s))

Directors

(See note 10)

Name

Voluntary details

Address

Usual residential address must be given. In the case of a corporation, give the registered or principal office address.

SCOPE OF AUTHORITY

Give brief particulars of the extent of the powers exercised. (e.g. whether they are limited to powers expressly conferred by the Instrument of appointment; or whether they are subject to express limitations.) Where the powers are exercised jointly give the name(s) of the person(s) concerned. You may cross refer to the details of person(s) disclosed elsewhere in the form.

Mark box(es) as applicable

(You may photocopy this page as required)

*Style/Titolo Amministratore Delegato del Credito Italiano

Forenames Egidio Giuseppe

Surname Bruno

*Honours etc. Commendatore della Repubblica Italiana

Previous Forenames

Previous surname

Piazza Cordusio

Post town Milano

County/Region

Postcode 20121

Country Italia

Date of Birth

16 04 35

Nationality Italiana

Business Occupation Dirigente di banca

Other Directorships Presidente della:

- Credit Holding Bank SpA - Milano

Consigliere:

- Mediobanca Banca di Credito Finanziario SpA
The extent of the authority to represent the company is:- (give details)

I poteri che gli derivano quale Amministratore Delegato, dallo Statuto Sociale e dalle deleghe di poteri deliberate dal Consiglio di Amministrazione e dal Comitato Esecutivo del Credito Italiano

These powers :-

☒ May be exercised alone (partly)

OR/AND

☒ Must be exercised with (totally)

(Give name(s) of co-authorised person(s))

in unione con l'altro Amministratore Delegato del

Credito Italiano, attualmente il Sig. Pier Carlo Marengo

Directors

(See note 10)

Name

• Voluntary details

Address

Usual residential address must be given. In the case of a corporation, give the registered or principal office address.

SCOPE OF AUTHORITY

Give brief particulars of the extent of the powers exercised. (e.g. whether they are limited to powers expressly conferred by the instrument of appointment; or whether they are subject to express limitations.) Where the powers are exercised jointly give the name(s) of the person(s) concerned. You may cross refer to the details of person(s) disclosed elsewhere on the form.

Mark box(es) as applicable

(You may photocopy this page as required)

*Style/Title Amministratore Delegato del Credito Italiano

Forenames Pier Carlo

Surname Marengo

*Honours etc. Grand'Ufficiale della Repubblica Italiana

• Previous Forenames _____

• Previous surname _____

Piazza Cordusio

Post town Milano

• County/Region _____

Postcode 20121

Country Italia

Date of Birth

28 01 26

Nationality Italiana

Business Occupation Dirigente di banca

Other Directorships V. Allegato

The extent of the authority to represent the company is :- (give details)

I poteri che gli derivano, quale Amministratore Delegato,
dal Codice Civile, dallo Statuto Sociale e dalle deleghe
di potere deliberate dal Consiglio di Amministrazione e
dal Comitato Esecutivo del Credito Italiano

These powers :-

☒ May be exercised alone (partly)

OR/AND

☒ Must be exercised with :- (Totally)

(Give name(s) of co-authorised person(s))

in unione con l'altro Amministratore Delegato del Credito
Italiano, attualmente il Sig. Egidio Giuseppe Bruno

Arrigo Gattai

Presidente:

- Comitato Olimpico Nazionale Italiano - Roma

Consigliere di:

- Banca Nazionale del Lavoro-Sezione Autonoma di Credito Alberghiero
Turistico e Sportivo - Roma

- Istituto di Credito Sportivo c/o Coni - Roma

Pier Carlo Marengo

Presidente:

- Credito Italiano International Ltd., Londra
- Credit Holding International SpA, Milano
- Commissione Tecnica e Pratica Bancaria della Camera di Commercio Internazionale - Sezione Italiana

Vice Presidente:

- Istituto per l'Enciclopedia della Banca e della Borsa SpA - Roma

Consigliere:

- Mediobanca SpA - Milano
- Meridiana Finanza SpA - Roma
- Raggio di Sole Finanziaria SpA - Roma
- Simest SpA - Roma
- TAV Treno Alta Velocità - Roma

Directors

(See note 10)

Name

* Voluntary details

Address

Usual residential address must be given. In the case of a corporation, give the registered or principal office address.

SCOPE OF AUTHORITY

Give brief particulars of the extent of the powers exercised. (e.g. whether they are limited to powers expressly conferred by the instrument of appointment; or whether they are subject to express limitations.) Where the powers are exercised jointly give the name(s) of the person(s) concerned. You may cross refer to the details of person(s) disclosed elsewhere on the form.

Mark box(es) as applicable

(You may photocopy this page as required)

*Style/Title Consigliere del Credito Italiano

Forenames Pietro

Surname Ciucci

*Honours etc. Dottore in Economia e Commercio - Direttore Centrale dell'IRI (Istituto per la Ricostruzione Industriale)

* Previous Forenames

* Previous surname

Via Vittorio Veneto, 89 - c/o IRI SpA

Post town Roma

* County/Region

Postcode 00187

Country Italia

Date of Birth

24 10 50

Nationality Italiana

Business Occupation Dirigente d'Azienda

Other Directorships V. Allegato

The extent of the authority to represent the company is :- (give details)

I poteri derivantigli quale Consigliere dal Codice

Civile e dagli Statuti Sociali

These powers :-

#

☒

May be exercised alone

#

OR

☐

Must be exercised with :-

(Give name(s) of co-authorised person(s))



Pietro Ciucci

Consigliere di:

- Banca Commerciale Italiana SpA - Milano
- Cassa di Risparmio Roma Holding SpA
- Banca di Roma SpA - Roma
- Autostrade (Concessioni e Costruzioni Autostrade) SpA - Roma
- CO.FI.RI. (Compagnia Finanziamenti e Rifornimenti) SpA - Roma
- CO.FI.RI. SIM SpA - Roma (Società di intermediazione mobiliare)
- CO.FI.RI. FACTOR SpA - Roma
- CO.FI.RI. LEASING SpA - Roma
- Finmeccanica SpA - Roma
- Ilva SpA - Roma
- Sipaf (Società di Iniziative e Partecipazioni Finanziarie) SpA - Roma
- Sme (Società Meridionale Finanziaria) SpA - Napoli
- SPI (Promozione e Sviluppo Imprenditoriale) SpA - Roma
- Stet (Società Finanziaria Telefonica) SpA - Torino

aprile 93

Directors

(See note A)

Name

* Voluntary details

Address

Usual residential address must be given, in the case of a corporation, give the registered or principal office address.

SCOPE OF AUTHORITY

Give brief particulars of the extent of the powers exercised, (e.g. whether they are limited to powers expressly conferred by the instrument of appointment; or whether they are subject to express limitations.) Where the powers are exercised jointly give the name(s) of the person(s) concerned. You may cross refer to the details of person(s) disclosed elsewhere on the form.

Mark box(es) as applicable

(You may photocopy this page as required)

*Style/Title Consigliere del Credito Italiano

Forenames ANTONIO

Surname CORTELLAZZO

*Honours etc. DOTTORE IN ECONOMIA E COMMERCIO

o Previous Forenames _____

o Previous surname _____

VIA PORCIGLIA, 14

Post town PADOVA

o County/Region _____

Postcode 35121

Country ITALIA

Date of Birth

01/09/37

Nationality ITALIANA

Business Occupation DOTTORE COMMERCIALISTA

Other Directorships _____

AMMINISTRATORE DELEGATO: DELTA ERRE Comunicazione Srl - Padova

CONSIGLIERE: IVG SPA - CERVARESE S. CROCE - (PADOVA)

The extent of the authority to represent the company is :- (give details)

I POTERI DERIVANTI DAL CODICE CIVILE E DAGLI STATUTI

SOCIALI

These powers :-

☒ May be exercised alone

OR

☐ Must be exercised with :-

(Give name(s) of co-authorised person(s))

Directors

(See note 12)

Name

* Voluntary details

Address

Usual residential address must be given. In the case of a corporation, give the registered or principal office address.

SCOPE OF AUTHORITY

Give brief particulars of the extent of the powers exercised. (e.g. whether they are limited to powers expressly conferred by the instrument of appointment; or whether they are subject to express limitations.) Where the powers are exercised jointly give the name(s) of the person(s) concerned. You may cross refer to the details of person(s) disclosed elsewhere on the form.

Mark box(es) as applicable

(You may photocopy this page as required)

*Style/Title Consigliere del Credito Italiano

Forenames Vittorio

Surname Di Stefano

*Honours etc. Avvocato - Direttore Centrale dell'IRI SpA
(Istituto per la Ricostruzione Industriale)

Previous Forenames _____

Previous surname _____

Via Vittorio Veneto, 89 - c/o IRI SpA

Post town Roma

County/Region _____

Postcode 00187

Country Italia

Date of Birth

1	6	0	7	3	2
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Nationality Italiana

Business Occupation Dirigente D'Azienda

Other Directorships V. allegato

The extent of the authority to represent the company is :- (give details)

Poteri derivantigli dal Codice Civile e dagli

Statuti Sociali

These powers :-

☒ May be exercised alone

OR

☐ Must be exercised with :-

(Give name(s) of co-authorised person(s))

Vittorio Si Stefano

Consigliere di:

- Finmare (Società Finanziaria Marittima) SpA - Genova
- Stet (Società Finanziaria Telefonica) SpA - Torino
- Iritecna (Società per l'Implantistica Industriale e l'assetto del territorio) SpA - Genova
- Assonime - Comitato di Presidenza - Roma
- Sifap SpA - Roma
- Sipab SpA - Roma

Directors

(See note 10)

Name

* Voluntary details

Address

Usual residential address must be given. In the case of a corporation, give the registered or principal office address.

SCOPE OF AUTHORITY

Give brief particulars of the extent of the powers exercised, (e.g. whether they are limited to powers expressly conferred by the instrument of appointment; or whether they are subject to express limitations.) Where the powers are exercised jointly give the name(s) of the person(s) concerned. You may cross refer to the details of person(s) disclosed elsewhere on the form.

Mark box(es) as applicable

(You may photocopy this page as required)

*Style/Title Consigliere del Credito Italiano

Forenames Alberto

Surname Falck

*Honours etc. Dottore in Economia e Commercio

o Previous Forenames _____

o Previous surname _____

presso Acciaierie Ferriere Lombarde Falck SpA-Via Mazzini, 28

Post town Sesto S. Giovanni (Milano)

o County/Region _____

Postcode 20099

Country Italia

Date of Birth

19 06 38

Nationality Italiana

Business Occupation Industriale

Other Directorships V. Allegato

The extent of the authority to represent the company is:- (give details)

I poteri derivanti dal Codice Civile e dagli

Statuti Sociali

These powers :-

☒ May be exercised alone

OR

☐ Must be exercised with :-

(Give name(s) of co-authorised person(s))

Alberto Falck

Presidente:

- Acciaierie e Ferriere Lombarde Falck SpA - Milano
- CMI SpA - Milano
- Ferrrometalli Safem SpA - Padova
- Vallemeria SpA - Mandello Lario (Como)
- Federacciai - Milano

Vice Presidente

- Avvenire Nuova Editoriale Italiana SpA

Consigliere:

- Pirelli SpA - Milano
- Ras SpA - Milano
- Milano Assicurazioni SpA - Milano
- Cam Finanziaria SpA - Milano
- San Faustin S.A.
- Fincomid SpA

Directors

(See also 117)

Name

* Voluntary details

Address

Usual residential address must be given. In the case of a corporation, give the registered or principal office address.

SCOPE OF AUTHORITY

Give brief particulars of the extent of the powers exercised. (e.g. whether they are limited to powers expressly conferred by the instrument of appointment; or whether they are subject to express limitations.) Where the powers are exercised jointly give the name(s) of the person(s) concerned. You may cross refer to the details of person(s) disclosed elsewhere on the form.

Mark box(es) as applicable

(You may photocopy this page as required)

*Style/Title Consigliere del Credito Italiano

Forenames Tommaso Vincenzo

Surname Milanese

*Honours etc. Dottore in Economia e Commercio - Condirettore Centrale dell'IRI (Istituto per la Ricostruzione Industriale)
Previous Forenames _____

Previous surname _____

Via Vittorio Veneto, 89 - c/o IRI SpA

Post town Roma

County/Region _____

Postcode 00187

Country Italia

Date of Birth

2	6	0	7	4	7
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Nationality Italiana

Business Occupation Dirigente d'Azienda

Other Directorships V. allegato

The extent of the authority to represent the company is :- (give details)

I poteri derivantigli quale Consigliere dal Codice

Civile e dagli Statuti Sociali

These powers :-

☒ May be exercised alone

OR

☐ Must be exercised with :-

(Give name(s) of co-authorised person(s))

Tommaso Vincenzo Milanese

Consigliere:

- Sip SpA - Roma
- Sipaf (Soc. di Iniziative e Partecipazioni Finanziarie) SpA - Roma
- G.I. Profidi (Soc. di Distribuzione di Prodotti Finanziari) SpA - Roma
- Cofiri (Compagnia Finanziamenti e Rifi nziamenti) SpA - Roma
- Sasa (Assicurazioni Riassicurazioni) SpA - Trieste
- Cofiri Factor SpA
- Cofiri Leasing SpA

• Directors

(See note 10)

Name

• Voluntary details

Address

Usual residential address must be given. In the case of a corporation, give the registered or principal office address.

SCOPE OF AUTHORITY

Give brief particulars of the extent of the powers exercised. (e.g. whether they are limited to powers expressly conferred by the instrument of appointment; or whether they are subject to express limitations.) Where the powers are exercised jointly give the name(s) of the person(s) concerned. You may cross refer to the details of person(s) disclosed elsewhere on the form.

Mark box(es) as applicable

(You may photocopy this page as required)

*Style/Title Consigliere del Credito Italiano

Forenames Paolo

Surname Gastaldi

*Honours etc. _____

• Previous Forenames Laureato in Filosofia e in Economia e Commercio- Direttore Generale CONFAPI-Confederazione Italiana

• Previous surname della Piccola e Media Industria - Roma

Via Courmayeur 78 A/5

Post town Roma

• Country/Region _____

Postcode 00135

Country Italia

Date of Birth

0	4	0	8	4	9
---	---	---	---	---	---

Nationality Italiana

Business Occupation Dirigente d'Azienda

Other Directorships V. Allegato

The extent of the authority to represent the company is :- (give details)

I poteri derivantigli dal Codice Civile e dagli Statuti

Sociali

These powers :-

☒ May be exercised alone

OR

☐ Must be exercised with :-

(Give name(s) of co-authorised person(s))

Paolo Gastaldi

Direttore Generale:

- CONFAPI (Confederazione Italiana delle Piccole e Medie Industrie) - Roma

Consigliere Delegato:

- Cespim Srl - Roma

Consigliere:

- CNEL - Commissione Nazionale Economia e Lavoro - Roma

Directors

(See note 10)

Name

Voluntary details

Address

Usual residential address must be given, in the case of a corporation, give the registered or principal office address.

SCOPE OF AUTHORITY

Give brief particulars of the extent of the powers exercised. (e.g. whether they are limited to powers expressly conferred by the instrument of appointment; or whether they are subject to express limitations.) Where the powers are exercised jointly give the name(s) of the person(s) concerned. You may cross refer to the details of person(s) disclosed elsewhere on the form.

Mark box(es) as applicable

(You may photocopy this page as required)

*Style/Title Consigliere del Credito Italiano

Forenames Giovanna

Surname Recchi

*Honours etc. Laureata in Filosofia

Previous Forenames _____

Previous surname _____

Via Montevecchio, 28

Post town Torino

County/Region _____

Postcode 10128

Country Italia

Date of Birth

27 07 44

Nationality Italiana

Business Occupation Industriale

Other Directorships _____

Presidente della Recchi Finanziaria SpA - Torino

Consigliere della Casa Editrice Marietti SpA - Genova

The extent of the authority to represent the company is :- (give details)

I poteri derivantile dal Codice Civile e dagli Statuti

Sociali

These powers :-

☒ May be exercised alone

OR

☐ Must be exercised with :-

(Give name(s) of co-authorized person(s))

Directors

(See note 10)

Name

* Voluntary details

Address

Usual residential address must be given. In the case of a corporation, give the registered or principal office address.

SCOPE OF AUTHORITY

Give brief particulars of the extent of the powers exercised. (e.g. whether they are limited to powers expressly conferred by the Instrument of appointment; or whether they are subject to express limitations.) Where the powers are exercised jointly give the name(s) of the person(s) concerned. You may cross refer to the details of person(s) disclosed elsewhere on the form.

Mark box(es) as applicable

(You may photocopy this page as required)

*Style/Title Consigliere del Credito Italiano

Forenames Gianmario

Surname Roveraro

*Honours etc. Laureato in Economia e Commercio

Previous Forenames _____

Previous surname _____

presso Akros Finanziaria SpA - Corso Italia, 3

Post town Milano

County/Region _____

Postcode 20122

Country Italia

Date of Birth

2	4	0	5	3	6
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Nationality Italiana

Business Occupation Dirigente d'Azienda

Other Directorships V. Allegato

The extent of the authority to represent the company is:- (give details)

I poteri derivantigli dal Codice Civile e dagli Statuti

Sociali

These powers :-

☒ May be exercised alone

OR

☐ Must be exercised with :-

(Give name(s) of co-authorized person(s))

Gianmarco Roveraro

Presidente:

- Abax Srl - Milano
- Akros Mercantile SpA - Milano
- Akros International Holding
- Service Management Italia SpA
- Cassa Previdenza e Assistenza Dirigenti Akros

Amministratore Delegato:

- Akros International Holding SpA - Milano

Vice Presidente:

- Commercial Union Assicurazioni SpA - Milano
- Commercial Union Life SpA

Consigliere:

- Azimut Consulenza SIM SpA
- Acqua SpA
- Associazione Faes
- Campus Biomedico SpA
- Fidesign SpA
- Parmalat Finanziaria SpA
- Raggio di Sole Finanziaria SpA
- Sambonet SpA
- Techosp SpA

Constitution of company

(See notes 6 to 9)

#Mark box(es)
as applicable

(See note 9)

☒ A certified copy of the instrument constituting or defining the constitution of the company

AND

☐ * A certified translation

*is/are delivered for registration

Already supplied

* Delete as applicable

AND/OR

A certified copy of the constitutional documents and latest accounts of the company, together with a certified translation of them if they are not in the English language, must accompany this form.

☒ A copy of the latest accounts of the company

AND

☐ A certified translation

*is/are delivered for registration

Already supplied

AND/OR

The company may rely on constitutional and accounting documents previously filed in respect of another branch registered in the United Kingdom.

The
☐ Constitutional documents (*and certified translations)

AND/OR

☐ The latest accounts (*and certified translations)

of the company were previously delivered on the registration of the branch of the company at :-

Cardiff ☐

Edinburgh ☐

Belfast ☐

Registration no.

AND/OR

The company may also rely on particulars about the company previously filed in respect of another branch in that part of Great Britain, provided that any alterations have been notified to the Registrar.

☐ the particulars about the company were previously delivered in respect of a branch of the company registered at THIS registry.

Registration no.

AND/OR

The company may also rely on constitutional documents and particulars about the company officers previously filed in respect of a former Place of Business of that company, provided that any alterations have been notified to the Registrar.

☒ The
Constitutional documents (*and certified translation)

AND/OR

☒ Particulars of the current directors and secretary(s)

were previously delivered in respect of a place of business of the company registered at THIS registry.

Registration no.

NOTE :- In all cases, the registration number of the branch or place of business relied upon must be given.

PART B - BRANCH DETAILS

Persons authorised to represent the company or accept service of process.

Give details of all persons who are authorised to represent the company as permanent representatives of the company in respect of the business of the branch. Give details also of all persons resident in Great Britain, who are authorised to accept service of process on the company's behalf.

* Delete as appropriate

SCOPE OF AUTHORITY

(This part does not apply to a person only authorised to accept service on behalf of the company)

Give brief particulars of the extent of the powers exercised. (e.g. whether they are limited to powers expressly conferred by the instrument of appointment; or whether they are subject to express limitations.) Where the powers are exercised, jointly give the name(s) of the person(s) concerned. You may cross refer to the details of person(s) disclosed elsewhere on the form.

Mark box(es) as appropriate)

*Style/Title MR
 Forenames PETER WILLIAM
 Surname JARMAN
 Address 17 MOORGATE

Post town LONDON
 County/Region _____ Postcode EC2R 6AR

Is # ☒ Authorised to accept service of process on the company's behalf

*AND/OR

Is # ☒ Authorised to represent the company in relation to that business

The extent of the authority to represent the company is :- (give details)

Articles of Association - No 39
and resolution of the Board of
Directors 27 NOVEMBER 1984
Copy attached.

These powers :-

☐ May be exercised alone

OR

☒ Must be exercised with :-

(Give name(s) of co-authorised person(s))

AUTHORISED SIGNATORIES OF THE BRANCH
AS PER THE ATTACHED SIGNATURE
LIST (B)

Persons authorised to represent the company or accept service of process.

Give details of all persons who are authorised to represent the company as permanent representatives of the company in respect of the business of the branch. Give details also of all persons resident in Great Britain, who are authorised to accept service of process on the company's behalf.

* Delete as appropriate

SCOPE OF AUTHORITY

(This part does not apply to a person only authorised to accept service on behalf of the company)

Give brief particulars of the extent of the powers exercised. (e.g. whether they are limited to powers expressly conferred by the instrument of appointment; or whether they are subject to express limitations.) Where the powers are exercised jointly give the name(s) of the person(s) concerned. You may cross refer to the details of person(s) disclosed elsewhere on the form.

Mark box(es) as appropriate)

(You may photocopy this page as required)

*Style/Title MR.
Forenames MARCELLO
Surname MANCINI
Address 17 MODGATE
LONDON EC2R 6AR
Post town _____
County/Region _____ Postcode EC2R 6AR

Is # ☒ Authorised to accept service of process on the company's behalf

*AND/OR

Is # ☒ Authorised to represent the company in relation to that business

The extent of the authority to represent the company is :- (give details)

Articles of Association - No 39
and resolution of the Board of
Directors 27 NOVEMBER 1984
Copy attached

These powers :-

☐ May be exercised alone

OR

☒ Must be exercised with :-

(Give name(s) of co-authorised person(s))

AUTHORISED SIGNATORIES OF THE BRANCH as
PER THE ATTACHED SIGNATURE LIST. (R)

Address of branch

(See note 11)

Address <u>17 MOORGATE</u>	
Post town <u>LONDON</u>	
County\Region _____	Postcode <u>EC2R 6HX</u>

Branch Details

(See note 12)

Date branch opened	<u>910572</u>
Business carried on at branch _____	
<u>GENERAL COMMERCIAL BANKING</u>	

SIGNATURE

Signed	<u>J. G. O'Connell</u> ⁱⁿ <u>Clayton</u>
	(* Director / Secretary / Permanent representative)
Date	<u>1/6/93</u>
This form contains <u>21</u> continuation sheets.	

To whom should Companies House
direct any enquiries about the
information on this form?

Name	<u>J. G. O'CONNELL</u>		
Address	<u>17 MOORGATE</u>		
	<u>LONDON</u>	Postcode	<u>EC2R 6HX</u>
Telephone	<u>071-606-9011</u>	Extension	<u>275</u>

When completed, this form together with any enclosures should be delivered to the Registrar of Companies at
for branches established in England and Wales for branches established in Scotland

Companies House
Crown Way
Cardiff
CF4 3UZ

Companies House
100 - 102 George Street
Edinburgh
EN2 3DJ