

Please complete in typescript, or in bold black capitals. CHFP041

88(2) Return of Allotment of Shares

Company Number	160955
Company name in full	3E Development 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.)

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)

	Fro	om		To)
Day	Month	n Year	Day	Month	Year
1 3	0 4	2 0 0 3			1

Ordinary "A"	
3297	
£0.10	
£60.66	

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		

(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 signed the form send it to the Registrar of Companies at:

SCT SKVD20IS 0211
COMPANIES HOUSE 20/09/03

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 DX 235 for companies registered in Scotland Edinburgh

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

Shareholder details		Shares and share class allotted	
Name		Class of shares	Number
Hank Uberoi		allotted	allotted
Address			
321 Upper Mountain Avenue		Ordinary	13297
Upper Monclair, New Jersey	7 07043 USA		_
UK Po	stcode LLLLLL		
Name		Class of shares allotted	Number allotted
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Address			
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L		L	_
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Name		Class of shares allotted	Number allotted
Address			
Address			
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UK Po	stcode L L L L L L	<u> </u>	_
Name		Class of shares allotted	Number allotted
		diiottod	anottea
Address			
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UK Po	ostcode LLLLLLL		_
Name		Class of shares	Number
		allotted	allotted
Address			
		L	_
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UK Pa	ostcode LLLLLL	<u> </u>	
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Please enter the further of continu	uation sheet(s) (if any) attached to this	s form	
Signed // WS	Date	1/1/03	
A-director/ secretary / ad-sinistrator / adminis		Please delete as	appropriate
Diagonal situation and a situation of the situation of th			
Please give the name, address, telephone number and, if available,	Peter G Wilson – McClure Naismith		
a DX number and Exchange of the person Companies House should	49 Queen Street Edinburgh	1,	
contact if there is any query.	EH2 3NH Tel: 0131 220 1002	204 2700	
	DX ED 135 DX Exchange Edinburgh	GLASGOW	