CHFPO83						
Company Number	3279013	3279013				
Company name in full	PLUSNET PLC					
Shares allotted (including bond	us shares):					
	From	1		То		
Date or period during which shares were allotted (If shares were allotted on one date enter that date in the "from" box.)	Day Month 16 11	<i>Year</i> 2006	<i>Day</i> 16	Month Year 11 2006		
Class of shares fordinary or preference etc)	Ordinary	Ordinary				
Number allotted	6,975					
Nominal value of each share	£0.002		·			
Amount (if any) paid or due on each share (including any share premium)	£0.90					
List the names and addresses of t	the allottees and the num	ber of shares	allotted to ea	ch overleaf		
f the allotted shares are fully o	or partly paid up otherw	ise than in ca	ish please s	tate:		
% that each share is to be reated as paid up						
Consideration for which he shares were allotted This information must be supported by he duly stamped contract or by the duly						
stamped particulars on Form 88(3) if the contract is not in writing.)						

A47
COMPANIES HOUSE

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 DX235 For companies registered in Scotland Edinburgh

ames and addresses of the allottees	(List joint share allotments consecutively)
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Shareholder details	Shares and share class allott		
Name Pershing Keen Nominees Limited a/c GICLT PART ID 601	Class of shares allotted	Numbe allotted	
Capstan House One Clove Crescent, East India Dock, London,	Ordinary	6,975	
	<u> </u>		
	<u> </u>	L	
UK Postcode E14 2BH			
Name Address	Class of shares allotted	Numbe allotted	
L	Ordinary		
		!	
UK Postcode			
Name	Class of shares allotted	Numbe	
Address		-	
		i	
	\ <u> </u>	<u> </u>	
UK Postcode L L L L L	<u> </u>	L	
Name	Class of shares allotted	Numbe allotted	
Address			
		L	
UK Postcode L L L L L L		}	
Name	Class of shares allotted	Numbe allotted	
Address	TOTALS	6,975	
	<u> </u>		
UK Postcode [_ L _ L _ L			
Please enter the number of continuation sheet(s) (if any) attached to this	form :		
ed	te_ 24-lu 106_		
lirector / secretary / administrator / administrative receiver / receiver manager / receiver	Please del	ete as appropriate	
se give the name, address, hone number and, if available,	RRY STREET, SHEFFIELD S	69 2WL	
Tone number and, it available,			