

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

Return of Allotment of Shares

Company Number	4094918			
Company name in full	VENTONA (RETTORS) HAD.			
hares 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.)	From Day Month Year 100000	To Day Month Year 2,6 1,0 2,0,0		
Class of shares (ordinary or preference etc.)	ORDINARY.			
Number allotted	998			
Nominal value of each share	EI			
Amount (if any) paid or due on each share (including any share premium)	EI	·		
List the names and addresses of the a If the allotted shares are fully o				
% that each share is to be treated as paid up	wo Z			
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)				
	When you have completed and the Registrar of Companies at:	signed the form send it to		

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 YENTINA HOLDINGS LTD.	Class of shares allotted	Number allotted	
Address Riffiences MANOR, COLLINGTON, BROMYAND	DRDWARY	998	
UK Postcode HRJL4NA	L	L	
Name	Class of shares allotted	Number allotted	
Address		,	
UK Postcode LLLLLL	L	L	
Name L	Class of shares allotted	Number allotted	
Address			
I .			
UK Postcode LLLLL			
Name I	Class of shares allotted	Number allotted	
Address			
	1	<u> </u>	
UK Postcode L L L L L		<u> </u>	
Name	Class of shares allotted	Number allotted	
Address		;	
	<u> </u>	<u> </u>	
UK Postcode L L L L L	L		
Please enter the number of continuation sheet(s) (if any) attached to the	nis form	······································	
Signed Date	26/10/00		
A director / secretary / administrator / admin		ppropriate	
Please give the name, address, telephone number and, if available.	LIKUOSI		
telephone number and, if available, a DX number and Exchange of the person Companies House should contact if there is any query. Tel DY II 755			