Package:

'Laserform'

by Laserform International Ltd.

Please complete in typescript, or in bold black capitals.

CHFP025

Company Number

Company name in full

8	8	(2)
Return of	Allotm	ent	of Sha	/ ares

	Return of Anothern of Share
	1
04823611	
NUMBER OF THE PROPERTY OF THE	
NEWINCCO 267 LIMITED	1
	

hares allotted (including bonus	•	T -
ate or period during which nares were allotted shares were allotted on one date that date in the "from" box)	From Day Month Year 2 5 0 8 2 0 0 3	To Day Month Year
lass of shares rdinary or preference etc)	B ORDINARY	
umber allotted	396,751	
ominal value of each share	0.10	
mount (if any) paid or due on each	£1	
ist the names and addresses of the allottee	s and the number of shares allotted to ea	ch overleaf

% 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)		

When you have completed and signed the form please 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



Shareholder details		Shares and share	Shares and share class allotted	
Name _JULIAN DELISLE BURNS Address		Class of shares allotted	Number allotted	
10 GAYTON ROAD, HAMPSTEAD, LO	ONDON	_B ORDINARY	178,538	
UK P	ostcode N W 3 L I T X			
Name STEPHEN ROGER MORRISON Address		Class of shares allotted	Number allotted	
16 EAST HEATH ROAD, LONDON		B ORDINARY	178,538	
UKP	ostcode <u>N W 3 L 1 A L</u>		<u> </u>	
Name DAVID LIDDIMENT Address		Class of shares allotted	Number allotted	
7 LONSDALE ROAD, LONDON		B ORDINARY	39,675	
UK P	ostcode W 4 1 N D			
Name		Class of shares allotted	Number allotted	
Address				
UK P	Postcode	L		
Name		Class of shares allotted	Number allotted	
Address				
↑ UK P	ostcode			
Please enter the number of continua	tion sheets (if any) attached to this form			
Signed	Date	25 Augus	r 2003	
	ministrative reaciver / receiver manager / receiver	Please d	elete as appropriate	
Please give the name, address, telephone number and, if available,	Olswang			
a DX number and Exchange of the person Companies House should contact if there is any query.	90 High Holborn, London, W	Tel +44 020	7067 3000	

DX number DX 37972

Laserform International 02/00

DX exchange Kingsway