

Return of Allotment of Shares

Please complete in typescript, or in bold black capitals. CHWP000

Company Number

nnany nama in full

26077	
DELTA PLC	

Company hame in run	DECTA PLC			
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)	From Day Month Year 0,90,22004	To Day Month Year 0 9 0 2 2 0 0 4	1	
Class of shares (ordinary or preference etc)	ORDINARY			
Number allotted	3,598			
Nominal value of each share	25p			
Amount (if any) paid or due on eac share (including any share premium)	h 72r			
List the names and addresses of th	e allottees and the number of shares allot	ted 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 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:

COMPANIES HOUSE

le

12/02/04

Companies House, Crown Way, Cardiff CF14 3UZ For companies registered in England and Wales

DX 33050 Cardiff

DX 235 Edinburgh

Companies House, 37 Castle Terrace, Edinburgh EH1 2EB For companies registered in Scotland

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

' Shareholder details	Shares and share class allotted	
Name CAZENOVE NUMINIES LIMITED	Class of shares allotted	Number allotted
Address		
20 MODEGATE, LONDON	15P ORDINARY	3,598
UK Postcode & C2R 6DA		-
Name	Class of shares allotted	Number allotted
Address		3
		-
UK Postcode	<u> </u>	
Name	Class of shares allotted	Number allotted
Address		
		- L
UK Postcode	<u> </u>	_ L
Name	Class of shares allotted	Number allotted
Address		
		- L
UK Postcode LLLLLL	<u> </u>	
Name	Class of shares allotted	Number allotted
Address		•
1		
UK Postcode ここにここに		
Please enter the number of continuation sheets (if any) attached to this	form	
Signed D	ate 69.02.04	
A directer / secretary / administrator / administrative receiver / receiver manager / receiver		te as appropriate
Please give the name, address, telephone number and, if available, a DX number and Exchange of the person Companies House should COMPAN SECCETARI- LINGSWAY LI	NON WAB	IA PIC
person Companies House should contact if there is any query.	Tel 0707	8383635

DX number

DX exchange