

Return of Allotment of Shares

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

Company Number

26077	
DELTA PLC	

Company name in full	LECTA PLC	JELTA PLC		
Shares allotted (including bonus shares):				
Date or period during w hich shares were allotted (If shares were allotted on one date enter that date in the "from" box)	From Day Month Year 0 3 0 2 2 0 0 5	To Day Month Year 0 3 0 2 2 0 0 5		
Class of shares (ordinary or preference etc)	ORDINARY			
Number allotted	2.595			
Nominal value of each share	25p			
Amount (if any) paid or due on eac share (including any share premium)	h 82p			
List the names and addresses of th	e allottees and the number of shares allot	tted 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

е

Companies House, Crown Way, Cardiff CF14 3UZ

DX 33050 Cardiff

For companies registered in England and Wales

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 MICHARL ASHTON	Class of shares allotted	Number allotted
Address		
7 KIRKSTONE DRIVE ROYTON	250 DROWNARY	2,595
UK Postcode OLLZ 67P	L	<u> </u>
Name	Class of shares allotted	Number allotted
Address		
L	<u> </u>	L
UK Postcode LLLL	L	L
Name	Class of shares allotted	Number allotted
Address		
UK Postcode 1 1 1 1 1 1		
		<u> </u>
Name	Class of shares allotted	Number allotted
Address		
	L	L
UK Postcode	<u> </u>	
Name	Class of shares allotted	Number allotted
Address		
	L	<u> </u>
UK Postcode		<u> </u>
Please enter the number of continuation sheets (if any) attached to this f	orm	
SignedDancus	ate 08.02.05.	
A director / secretary / administrator / ddministrative receiver / receiver manager / receiver		as appropriate
clease give the name, address, elephone number and, if available, DX number and Exchange of the erson Companies House should ontact if there is any query.	HL DEPT, DELT INDON, WCAB (363535 NP 7 FIC

DX number

DX exchange