

AMENDMENT

From

Month

Return of Allotment of Shares

То

Voor

Companies House	
— for the record —	

Please complete in typescript, or in bold black capitals. CHFP000

Company Number

Company	name	in	fui
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2077314			
AARONCARE	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)

Class of shares (ordinary or preference etc)

Number allotted

Nominal value of each share

Amount (if any) paid or due on each share (including any share premium)

Day World Fear	Day World Fear
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List the names and addresses of the allottees and the number of shares allotted 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)

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17/11/2000

When you have completed and signed the form send it to the Registrar of Companies at:

ompanies House, Crown Way, Cardiff CF14 3UZ or companies registered in England and Wales

DX 33050 Cardiff

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

DX 235 Edinburgh

COMPANIES HOUSE

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Form revised January 2000

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

Shareholder details	Shares and share class allotted		
Name JOHN MICHOEL FRANCIS	Class of shares allotted	Number allotted	
Address		•	
NOODMANSEY, NO HULL EAST YORKSHIRE	DRAINARY]*	
WOOD MANSEY, N. HULL EAST YORKSHIRE	<u> </u>		
UK Postcode よとしこでにあ	L		
Name	Class of shares allotted	Number allotted	
Address			
<u> </u>	\	<u> </u>	
UK Postcode	<u> </u>		
Name	Class of shares allotted	Number allotted	
Address			
	<u></u>	<u> </u>	
UK Postcode		<u> </u>	
Name	Class of shares allotted	Number allotted	
Address			
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UK Postcode	<u></u>	L	
Name	Class of shares allotted	Number allotted	
Address			
	L	1	
UK Postcode		L	
Please enter the number of continuation sheets (if any) attached to this f	orm		
Signed Signed Date	e 11. 11. 05		
A director / secretary / administrator / administrative receiver / receiver manager / receiver	ver Please de	lete as appropriate	
Please give the name, address, elephone number and, if available, a DX number and Exchange of the			
person Companies House should contact if there is any query.	Tal		

DX number

DX exchange