

**Return of Allotment of Shares** 

To

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

Company Number

2588522

Company name in full

LANZ LIMITED		

## 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 Year Month Day Month Year Day 200

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)

ORDINARY	
210,000	
10 <sub>P</sub>	

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	İŞ	to	pe
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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			<del>.</del>	

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



11/09/01

COMPANIES HOUSE

Companies House, Crown Way, Cardiff CF14 3UZ For 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

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

Shareholder details	Shares and share	class allotted
Name BALJEET GARCHA	Class of shares allotted	Number allotted
Address  T GREEN HILL GOURT  GREAT NORTH ROAD	ORDINARY	70,000
BARNET UK Postcode ENB 44B		L
Name MARK BONNAMY	Class of shares allotted	Number allotted
Address ROAD	ORDINARY	70,000
UK Postcode UBIOSHA		
Name BARRING TON JOHNSON	Class of shares allotted	Number allotted
Address  HI MANOR WOOD ROAD  LONDON	ORDINARY	70,000
UK Postcode (CRBC 4LG		•
Name	Class of shares allotted	Number allotted
Address		
UK Postcode		L
Name	Class of shares allotted	Number allotted
Address	-	
	_	
UK Postcode		<u> </u>
Please enter the number of continuation sheets (if any) attached to this	form	
Signed Da	ate 10 9	0/
A director / secretary / administrator / administrative resciver / resciver manager / rece	siver Please o	lelete as appropriate

Please give the name, address, telephone number and, if available, a DX number and Exchange of the person Companies House should contact if there is any query.

B. John	uson		
37 Ea	st X	Load	
London	NI	6AZ	Tel 020 72512000
DX number		DX exch	nange