Package:

'Laserform'

Company Number

2611800

by Laserform International Ltd.

Please complete in typescript, or in bold black capitals.

LD3

COMPANIES HOUSE

Laserrorm international 1/9/

0800

03/04/00

288a

Appointment of director or secretary

(NOT for resignation (use Form 288b) or change of particulars (use Form 288c))

| | | | | | | | J | | | | |
|---|--|------------------------|----------------------|-----------------|--------------|--------------------------------|---|-------------|------------|--|--|
| Company Name in full | MICE | ROSOFT | PROPER' | ries u | K LIMI | ITED | | | | | |
| | | | | | | | | | | | |
| | . | Day_ | Month | Year | _ | | Day | Month | Year | | |
| * F 2 8 8 A F 1 0 * appointr | te of ment | 07 | 01 | 2000 | †Date | e of Birth | 06 | 02 | 1959 | | |
| Appointment Appointment as director form | | | | | | | rk the appropriate box. If appointment is or and secretary mark both boxes. | | | | |
| NAME *Style / Title | MR | | | | *Honou | rs etc | | | | | |
| Notes on completion appear on reverse. Forename(s) | JOHN GRAHAM | | | | | | | | | | |
| Surname | CONNORS | | | | | | | | | | |
| Previous Forename(s) | | | | | Pre Surna | vious me(s) | | | _ | | |
| Usual residential address | 7623 | 3 OVERI | AKE DR | IVE W. | | .,,,,, | | | | | |
| Post town | MED | ENA | | | | Postcode | 98039 |) | | | |
| County / Region | WASI | WASHINGTON | | | | Country | USA | | | | |
| †Nationality | US CITIZEN TBusiness occupation CHIEF FINANCIA OFFICER | | | | | | AL | | | | |
| †Other directorships (additional space overleaf) | con | sent to a | act as ** | director | / 3860 | extacray of th | e above | named co | mpany | | |
| * Voluntary details. † Directors only. | | gro | los | | | Date | Janu | ary 7, | 2000 | | |
| , 2 | Adirector secretary etc must sign the form below. | | | | | | | | | | |
| Signed | 1 | نم م | In | ren | ~~ | Date | 63 | . 04. | 2000 | | |
| **Please delete as appropriate | , by d | rector 4 se | ecretary /-a- | honistrato | r / admini | strative rec | civer / recei | ver manager | /receiver) | | |
| 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. | Rick | nards E | Butler | | | oh Stree | | | | | |
| contact if there is any query. | | : SMG/2 number : | | | | 247 655 Inge City | | | | | |
| *L21A3PC2* | Regis Com | strar of (panies l | Companie House, C | s at: rown W | ay, Car | the form rdiff, CF4 nd Wales | | end it to t | | | |

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB

for companies registered in Scotland

DX 235 Edinburgh

| | Company Number | 2611800 | | | |
|-------------------|----------------------|---------|---|---|------|
| † Directors only. | †Other directorships | | | | |
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NOTES

Show the full forenames, NOT INITIALS. If the director or secretary is a corporation or Scottish firm, show the name on surname line and registered or principal office on the usual residential line.

Give previous forenames or surname(s) except:

- for a married woman, the name by which she was known before marriage need not be given.
- for names not used since the age of 18 or for at least 20 years

A peer or individual known by a title may state the title instead of or in addition to the forenames and surname and need not give the name by which that person was known before he or she adopted the title or succeeded to it.

Other directorships.

Give the name of every company incorporated in Great Britain of which the person concerned is a director or has been a director at any time in the past five years.

You may exclude a company which either is, or at all times during the past five years when the person concerned was a director, was

- dormant
- a parent company which wholly owned the company making the return, or
- another wholly owned subsidiary of the same parent company.