

Return of Allotment of Shares

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

Company	Number
---------	--------

2920061

Commons and in fall						
Company name in full	IMIAGINATION TECHNOLOGIES GROUP PLC					
Shares allotted (including bonus shares):						
Date or period during which	From		То			
shares were allotted	Day Month		Day Month Year			
(If shares were allotted on one date enter that date in the "from" box)	1 9 0 2 2	0 0 7				
Class of shares (ordinary or preference etc)	ORDINARY	ORDINARY	ORDINARY			
Number allotted	51500	6500	50000			
Nominal value of each share	10P	10P	10P			
Amount (if any) paid or due on each share (including any share premium)	h 19P	34.5P	46P			
List the names and addresses of th	e 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)						

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

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

DX 33050 Cardiff

08/03/2007 A13 COMPANIES HOUSE

189

ie

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 allotte
Name CAZENOVE NOMINEES LIMITE	CAZENOVE NOMINEES LIMITED A/C ESOS		
Address 20 MOORGATE,LONDON		ORDINARY	108,000
UK P	ostcode EC2R6DA		
Name		Class of shares allotted	Number allotted
Address		_	I
UK P	ostcode		t
Name		Class of shares allotted	Number allotted
Address		_	
LIIZ D		_	<u> </u>
UK P	ostcode	Class of shares	Number
Address		allotted	allotted
		_	t
UK Pe	ostcode		L
Name		Class of shares allotted	Number allotted
Address		_	t
UK Po	ostcode டடடடடட		
Please enter the number of continu	ation sheets (if any) attached to this	form	
1 .	ought.	ate1-3-07	•
A director / secretary / administrator / administrator / administrator /	ministrative reseiver //receiver manager / rec	eiver Please o	delete as appropria
lease give the name, address, lephone number and, if available, DX number and Exchange of the			
erson Companies House should ontact if there is any query.		Tel	
	DX number	DX exchange	