

Return of Allotment of Shares

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

Company Number

2920061

Company name in full	IMAGINATION TECHNOLOGIES GROUP PLC			
Shares allotted (including bor	nus shares):			
Date or period during which	From To			
shares were allotted (If shares were allotted on one date enter that date in the "from" box)	Day Month Year Day Month Year 3 0 0 8 2 0 0 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
Class of shares (ordinary or preference etc)	ORDINARY			
Number allotted	20000			
Nominal value of each share	10P			
Amount (if any) paid or due on eac share (including any share premium)	ch 47P			
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			

08/12/2007 COMPANIES HOUSE the Registrar of Companies at:

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 CAZENOVE NOMINEES LIMITED	A/C ESOS	Class of shares allotted	Number allotted
Address 20 MOORGATE,LONDON		ORDINARY	20,000
UK Post	code EC2R6DA	<u> </u>	<u> </u>
Name		Class of shares allotted	Number allotted
Address			L
UK Post	code LL LL LL	L	L
Name		Class of shares allotted	Number allotted
Address			
UK Post	code		L
Name		Class of shares allotted	Number allotted
Address			L
UK Post	code L L L L L L		L
Name		Class of shares allotted	Number allotted
Address			
UK Post	code		
Please enter the number of continuation		form	
Signed A Www. Pew	on sheets (if any) attached to this	10 - 0	9-07
A director / secretary / administrator / admin	istrative receiver / receiver manager / rece	rver Please	delete as appropnate
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		Tel	
	DX number DX exchange		