

Shares allotted (including bonus shares):

AMENDMENT TO FORM
SUBMITTED 22.09.2000

88(2)

Return of Allotment of Shares

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

Company Number

03423036

Company name in full

Aerial Support Services Limited

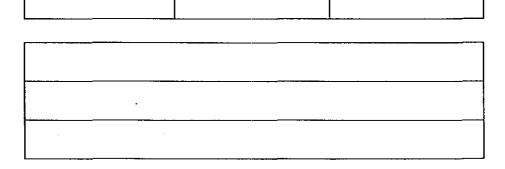
	From	To Day Month Year		
Date or period during which shares were allotted (If shares were allotted on one date enter that date in the "from" box)	Day Month Year 2 4 0 8 2 0 0 0			
Class of shares (ordinary or preference etc)	Ordinary			
Number allotted	2			
Nominal value of each share	£1			
Amount (if any) paid or due on each share (including any share premium)	£99,499			
List the names and addresses of the allot	tees and the number of shares allot	ted to each overleaf		
If the allotted shares are fully or pa	rtly paid up otherwise than in	cash please state:		

Consideration for which the shares were allotted
(This information must be supported by

% that each share is to be

treated as paid up

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

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

DX 235 Edinburgh

Names and a	addresses (of the	allottees	(List joint share allotments consecutively
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Shareholder details	Shares and share	class allotte
Name Blubeckers Limited	Class of shares allotted	Namber allotted
Address The Mill House, North Warnborough, Hook, Hampshire	Ordinary	2
	-	<u>. </u>
UK Postcode R G2 5 1 ET		<u> </u>
Name	Class of shares allotted	Number allotted
Address		
		L
UK Postcode LLLLL		L
Name	Class of shares allotted	Number allotted
Address		
		L
UK Postcode		L
Name	Class of shares allotted	Number allotted
Address	-	
		L
UK Postcode		
Name	Class of shares allotted	Number allotted
Address	-	
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<u> </u>		L
UK Postcode LLLLL		L
Please enter the number of continuation sheets (if any) attached to this	form	
igned Da	ite <u> </u>	
A director/ secretary / administrator/ administrative receiver / receiver manager / receiver	iver Please d	elete as appropriate
lease give the name, address,		

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.

RKR HAINES WATTS
30 CAMP ROAD
FARNBOROUGH
GU14 6EW

Tel

DX number

DX exchange