

Return of Allotment of Shares

Please complete in typescript, or
in bold black capitals.

CHFP036

Company Number

3615308

Company name in full

AARDVARK SITE INVESTIGATIONS 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			To		
Day	Month	Year	Day	Month	Year
0	1	0	4	2	0
		0			5

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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		
5		
£1		
£1		

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 is to be
treated as paid up

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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 DX 33050 Cardiff
For companies registered in England and Wales

Companies House, 37 Castle Terrace, Edinburgh EH1 2EB DX 235
For companies registered in Scotland Edinburgh



A27
COMPANIES HOUSE
21/04/05

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

Shareholder details	Shares and share class allotted	
Name <u>Christopher William Pow</u>	Class of shares allotted <u>Ordinary</u>	Number allotted <u>5</u>
Address <u>9 Adstone Road, Caddington, Bedfordshire</u>	_____	_____
UK Postcode <u>LU1 4NF</u>	_____	_____
Name _____	Class of shares allotted _____	Number allotted _____
Address _____	_____	_____
UK Postcode _____	_____	_____
Name _____	Class of shares allotted _____	Number allotted _____
Address _____	_____	_____
UK Postcode _____	_____	_____
Name _____	Class of shares allotted _____	Number allotted _____
Address _____	_____	_____
UK Postcode _____	_____	_____

Please enter the number of continuation sheet (if any) attached to this form

☐

Signed _____ Date 1-4-2008

A director / secretary / administrator / administrative receiver / receiver manager / receiver

Please delete 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.

Tel _____	
DX number _____	DX exchange _____