

## 88(2) Return of Allotment of Shares

CHFP000

Company Number	3638136		
Company name in full	STORMINT LIMITED		
Shares allotted (including bonu	ıs shares):		
	From To		
Date or period during which	Day Month Year Day Month Year		
shares were allotted "" shares were allotted on one date "er that date in the "from" box.	26112002		
Class of shares (ordinary or preference etc)	OKDINARY		
Number allotted	635-3		
Nominal value of each share	£1		
Amount (if any) paid or due on each share (including any share premium)	€1		
List the names and addresses of the	allottees and the number of shares allotted to each overleaf		
<sup>1f</sup> the allotted shares are fully o	or partly paid up otherwise than in cash please state:		
% that each share is to be treated as paid up			
Trouted do para 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

Companies House, 37 Castle Terrace, Edinburgh EH1 2EB

For companies registered in England and Wales

For companies registered in Scotland

0773

27/12/02 0710

27/11/02

A03

A31 COMPANIES HOUSE DX 33050 Cardiff

**DX 235** 

Edinburgh

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

Shareholder details	Shares and share class allotted	
Name PETER AAROSIN	Class of shares allotted	Number allotted
Address 25 PARK ROAD	ORDINARY	2700
GOOLE UK Postcode PN148EQ		<u></u>
Name  DAVID JOHNSON	Class of shares allotted	Number allotted
Address 28 CONGATE	ORNARY	2700
E-YURKS UK Postcode HILE INB		L
Name  DECRICK RANDLE	Class of shares allotted	Number allotted
Address 18 HEATHER DRIVE	ORDINARY	953
NUNEATON UK Postcode EY 12 PAT		
Name	Class of shares allotted	Number allotted
Address		L
UK Postcode		L
lame	Class of shares allotted	Number allotted
Address		L
UK Postcode		
Please enter the number of continuation sheet(s) (if any) attached to t	his form	
	Date	
. A director / secretary / administrator / administrative receiver / receiver manager / re	Ceiver Please de	elete as appropriate
ease 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