

88(2)
Return of Allotment of Shares

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

Company Number

Company name in full

38	16301	

DEEP BLUE FINANCIAL 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

O I I O Z O O 3

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	
3,400	
£1	
21	

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

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)

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

*ONCUL POTA

 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

Shareholder details		Shares and share class allotted	
Name CLIVE R. CORBETT		Class of shares allotted	Number allotted
Address 17 EASTERN PARADE		ORDINARY NEW VOTING	850
FAREHAM, HANT	code Poleori	<u> </u>	L
Name JURGA CORRETT		Class of shares allotted	Number allotted
Address 17 EASTERN PARADE		ORDINARY NON VOTING	2550
FAREHAM, HANT	code Poleori	1	
Name		Class of shares allotted	Number allotted
Address		L	l
LIK Post	code L L L L L L	<u></u>	
Name		Class of shares allotted	Number allotted
Address			
VK Post	code Lill	Class of shares	Number
Address		allotted	allotted
		L	
UK Post	code L L L L L L L		
Please enter the number of continuati	on sheets (if any) attached to this for	<u>_</u>	
A director / secretary / administrator / administrator /	Date istrative receiver / receiver manager / receiver	4 10 2003 Please dele	te as appropriate
Please give the name, address, selephone number and, if available, a DX number and Exchange of the			
person Companies House should contact if there is any query.	DX number	Tel	