

for the record



To

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

Company	Number
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Company name in full

04017031		
Idealsite Limited	 	

From

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)

Dav Month Year Month Year 0 10

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)

A Ordinary	
5	
£1.00	
£1.00	

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:



COMPANIES HOUSE

18/01/05

Companies House, Crown Way, Cardiff CF14 3UZ

DX 33050 Cardiff

For companies registered in England and Wales

DX 235 Edinburgh

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

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

Shareholder details Shares and share class			
Name	Class of shares	Number	
Dun Laoghaire Hostel Limited	allotted	allotted	
Address			
Annavlle House, Newtown, Waterford, Ireland	A Ordinary	5	
UK Postcode டடடடட	<u> </u>		
Name	Class of shares allotted	Number allotted	
Address			
		L	
	_		
UK Postcode			
Name	Class of shares	Number	
, ,	allotted	allotted	
Address	_		
		I	
UK Postcode			
Name	Class of shares allotted	Number allotted	
Address	-		
1	ı	1	
UK Postcode		L	
Name	Class of shares	Number	
	allotted	allotted	
Address			
	_	L	
	_ /		
UK Postcode	<u> </u>	L	
Please enter the number of continuation sheets (if any) attached to this	s form		
Signed Sec.	ate 23 12 04		
A director / secretary / administrator / administrative receiver / receiver manager / receiver	, ,	elete as appropriate	
lease give the name, address, ERNST & YOUNG elephone number and, if available, Annaville House,			

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.

Annaville House,					
	Newtown, Waterford				
	AAGCHOLO	Tel	00 351	Si	872094
DX number	DX excha	ange			