

88(2) Return of Allotment of Shares

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

Company Number

Company name in full

4126499

JOHAL	PROPERTIES	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)

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)

FIOIII				10			
Day	Month	Year	Day	Month	Year		
012	016	2004					

ORDINARY		
50		
\$ 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)

FULLY	Pard			

#ADFYJUN1* D595
COMPANIES HOUSE 03/06/04

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

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

DX 235 Edinburgh

DX 33050 Cardiff

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

Shareholder details	Shares and share class allotted		
Name GURNAM SINGM JOHAL	Class of shares allotted	Number allotted	
Address		_	
11 ULLSWATER RS, COPPICE FARM WM	ORDINARY	<u>50</u> ,	
NOW INVENTION, WILLOWEALL, WARDALL	_	<u> </u>	
UK Postcode WV LZ S.f. H			
Name	Class of shares allotted	Number allotted	
Address		L	
UK Postcode , , , , , , , , , , , , , , , , , , ,		1	
Name	Class of shares allotted	Number allotted	
Address	_		
UK Postcode		L	
Name	Class of shares allotted	Number allotted	
Address		L—	
UK Postcode L L L L L L	_	L	
Name	Class of shares allotted	Number allotted	
Address			
UK Postcode		<u> </u>	
Please enter the number of continuation sheets (if any) attached to the	nis form		
Signed 8-8 feetal	Date 2/6/04		
A Caretary / administration / administrative receiver descriver manager / r	essiver Please	delete as appropri	

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.

Bi	IOPINSOR	Singu	JOH	AL		
_11	ULLSWATER	2/2	COPF	ice	FARM	nay
New	_wornor_	MARSALL	Tel	015	143 254	-608
DX number		DX exc	change			