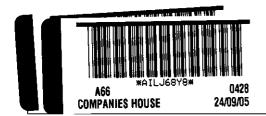


Please complete in typescript, or in bold black capitals.

88	(2)
Return of Allotr	ment of Shares

CHFP025				
Company Number	04418592			
Company name in full	BLUNDELLSANDS CLASSIC MANAGEMENT LIMITED			
Shares allotted (including bo	nus shares):			
Date or period during which shares were allotted (If shares were allotted on one date enter that date in the "from" box)	From Day Month Year 2 3 0 9 2 0 0 5	To Day Month Year		
Class of shares (ordinary or preference etc)	ORDINARY			
Number allotted	1			
Nominal value of each share	£1.00			
Amount (if any) paid or due on each share (including any share premium)	£1.00			
List the names and addresses of the all	ottees and the number of shares allotted to	each overleaf		
If the allotted shares are fully	or partly paid up otherwise tha	n 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				



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 Edinburgh For companies registered in Scotland

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

Shareholder details	Shares and share class allotted		
Name	Class of shares	Number	
John Leatherbarrow and Brenda Margaret Leatherbarrow	allotted	allotted	
Address		·	
APARTMENT 29, THE BLUNDELLSANDS CLASSIC, BLUNDELLSANDS	ORDINARY	<u>.1</u>	
ROAD WEST, SEFTON, MERSEYSIDE	.	·	
UK Postcode L 2 3 6 B A			
Name	Class of shares allotted	Number allotted	
	·	unotica	
Address			
	.	L	
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UK Postcode	<u> </u>	L,.	
Name	Class of shares	Number	
<u> </u>	allotted	allotted	
Address			
		<u> </u>	
UK Postcode		L	
Name	Class of shares allotted	Number allotted	
	- anotted	anotted	
Address			
	_	<u> </u>	
		L	
UK Postcode			
Name	Class of shares	Number	
	allotted	allotted	
Address			
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	_ -	L.,,,	
UK Postcode		!	
Please enter the number of continuation sheets (if any) attached to this form	m o		
Signed Du M Yures Dai	$\frac{1}{10} = \frac{23 - 9 - 20}{100}$	005	
A director / secretary / aXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XX Please de	lete as appropriate	
Please give the name, address, Davies Wallis Foyster	Davies Wallis Foyster		
telephone number and, if available,		·	
person Companies House should	ansgate, Manchester	, M3 3AA	
contact if there is any query.	Tel 0161 603 5000		

DX number DX 14313

DX exchange Manchester

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