

## Return of Allotment of Shares

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CHFP000	
Company Number	448 90 91
Company name in full	VASTEITY LIMITED
Shares allotted (including bor	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	From To
Date or period during which shares were allotted	Day Month Year Day Month Year
(If shares were allotted on one date enter that date in the "from" box.	1100162101014
Class of shares (ordinary or preference etc)	ORDINARY
Number allotted	2
Nominal value of each share	EI
Amount (if any) paid or due on eac share (including any share premium)	h £1
List the names and addresses of the	e 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)	When you have completed and signed the form send it to

A22 COMPANIES HOUSE

03/07/04

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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

Names and addresses of the allottees	(List joint share allotments consecutively	y)
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Shareholder details		Shares and share class allotted		
Name CLIVE ENSOR BOULT BE AND STEVEN JOHN BO Address JO WELCHESTON FARM	OULTBEE - BROOKS	Class of shares allotted	Number allotted	
WOOLHOPE, HEREFORD	,			
	ode H.R.L. 4QQ	ORDINANY	2_	
Name	·	Class of shares allotted	Number allotted	
Address	<del></del>			
L		L	L	
UK Postc	ode בבבבב			
Name		Class of shares allotted	Number allotted	
Address				
UK Posto	ode LLLLLL		<b>L</b>	
Name		Class of shares allotted	Number allotted	
Address			,	
L			<u> </u>	
UK Posto	ode בבבב בבב		<b></b>	
Name		Class of shares allotted	Number allotted	
Address		-		
		_		
UK Posto	code LLLLLL		L	
Please enter the number of continuation	on sheet(s) (if any) attached to thi	is form		
	5B V	ا ۱۰		
A director / secretary / administrator / admini	X Da	ate <u>24</u> 6 69 eiver <i>Please</i>	delete as appropriate	
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.		Tel		
	DX number	DX exchange		