

**The London Law Agency Limited**

Temple Chambers, Temple Avenue  
London EC4Y 0HP  
Tel: 020 7353 9471 Fax: 020 7583 1531  
DX 1053 London/Chancery Lane

**88(2)****Return of Allotment of Shares**

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

**CHFP050****Company Number**

4525438

**Company name in full**

HENRI L. JACCAZ &amp; CO. 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

Day Month Year

03-09-2002

To

Day Month Year

03-09-2002

**Class of shares***(ordinary or preference etc)*

Ord

**Number allotted**

99

**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 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  
the Registrar of Companies at:**

**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)*

Shareholder details <b>Sonia Leslev Jordan</b>		Shares and share class allotted	
Name _____	Class of shares allotted	Number allotted	
Address _____ 108 Carshalton Park Road _____	Ord	99	
_____ Carshalton _____ Surrey _____	_____	_____	
_____ SM5 3SG _____	_____	_____	
UK Postcode _____	_____	_____	
Name _____	Class of shares allotted	Number allotted	
Address _____	_____	_____	
_____	_____	_____	
UK Postcode _____	_____	_____	
Name _____	Class of shares allotted	Number allotted	
Address _____	_____	_____	
_____	_____	_____	
UK Postcode _____	_____	_____	
Name _____	Class of shares allotted	Number allotted	
Address _____	_____	_____	
_____	_____	_____	
UK Postcode _____	_____	_____	
Name _____	Class of shares allotted	Number allotted	
Address _____	_____	_____	
_____	_____	_____	
UK Postcode _____	_____	_____	

Please enter the number of continuation sheets (if any) attached to this form

Signed

*S. Jordan*

Date

12/9/02

A director / secretary / administrator / administrative receiver / receiver manager / receiver

*Please 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.

<b>LEDGER SPARKS</b>	
<b>CHARTERED CERTIFIED ACCOUNTANTS</b>	
<b>21-25 STAFFORD ROAD</b>	
<b>CROYDON CR9 4BQ</b>	Tel
<b>TEL: 020 8680 2211</b>	
DX number	DX exchange
<b>FAX: 020 8681 1240</b>	