

88(2)
Return of Allotment of Shares

To

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

Company Number

Company name in full

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From

MOVISTI I	LIMITED	

Shares allotted	(including	bonus	shares)	(:
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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)

ordinary unclassified				
160				
21-			•	
£1-				

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)

100 %		

Cash

When you have completed and signed the form send it to the Registrar of Companies at:

A44 #AUGIUMCE# 0467
COMPANIES HOUSE 0407703

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

Form Revised January 2000

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

Shareholder details		Shares and share class allotted		
Name ROSELEIGH LIMI	TED	Class of shares allotted	Number allotted	
Address 56 ROSEMOUNT R		Ordinary	160	
FLAX BOURTON BA	RISTOL	_	ŧ	
UK Pa	ostcode BS4814Q		L	
Name		Class of shares allotted	Number allotted	
Address				
,				
UK Pc	ostcode		<u> </u>	
Name		Class of shares allotted	Number allotted	
Address		_		
L			<u></u>	
UK Pa	ostcode	L	L	
Name		Class of shares allotted	Number allotted	
Address		_	1	
L			L	
UK Po	ostcode			
Name		Class of shares allotted	Number allotted	
Address		_]		
			L	
UK Po	ostcode e e e e e e e e	L		
Please enter the number of continua		s form		
Signed Adirector / secretary / administrator / adm	ministrative receiver / receiver manager / rec		delete as appropriate	
Please give the name, address, telephone number and, if available,	J. 0207			
a DX number and Exchange of the	56 Rosemount Road			
person Companies House should contact if there is any query.	BILISTOL BS48			
	DX number	DX exchange		