

Return of Allotment of Shares

Please complete in typescript, or

in bold black capitals.	
CHWP000	
Company Number	

1755903

Company Number	4733603				
Company name in full	FELIX GROUP PLC				
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 To Day Month Year Day Month Year 0 6 0 8 2 0 0 7				
Class of shares (ordinary or preference etc)	ORDINARY				
Number allotted	338077				
Nominal value of each share	1P				
Amount (if any) paid or due on each share (including any share premium)	ch 3 74P				
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)					

17/08/2007 **COMPANIES HOUSE** When you have completed and signed the form send 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 For companies registered in Scotland

DX 235 Edinburgh

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

Shareholder details	Shares and share	Shares and share class allotted	
Name MIKE WALLWORK	Class of shares allotted	Number allotted	
Address 52 VICTORIA ROAD, HALE, CHESHIRE	ORDINARY	338,077	
UK Postcode WA159AE	В	_	
Name	Class of shares allotted	Number allotted	
Address			
		<u> </u>	
UK Postcode	_	·	
Name .	Class of shares allotted	Number allotted	
Address			
UK Postcode	_		
Name	Class of shares allotted	Number allotted	
Address			
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UK Postcode டூடடடடட	_		
Name	Class of shares allotted	Number allotted	
Address	,		
t,			
UK Postcode			
Please enter the number of continuation sheets (if any) attached to	o this form		
Signed Klauatt	Date 15/08/07		
A director / secretary / administrator / administrative receiver / receiver manage	er / receiver Please	delete as appropnate	
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		