

## **Return of Allotment of Shares**

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

**Company Number** 

Company name in full

04833787		
Pharmorphix Limited	 	 

L					
Shares allotted (including bonus shares):					
	From	То			
Date or period during which shares were allotted (If shares were allotted on one date	Day Month Year  2,7 1,0 2,0,0,5	Day Month Year			
enter that date in the "from" box)	2110200				
Class of shares	Ordinary B				
(ordinary or preference etc)	1,000				
Number allotted					
Name and the last as a last and	€0.001				
Nominal value of each share					
Amount (if any) paid or due on each	1				
share (including any share premium)					
List the names and addresses of the	allottees and the number of shares allo	otted to each overleaf			
If the allotted shares are fully o	or partly paid up otherwise than i	n cash please state:			
% that each share is to be	100%				
treated as paid up					
Consideration for which	£2,250.00				
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)					
	NATI				
	When you have completed an	d signed the form send it to			

the Registrar of Companies at:



**COMPANIES HOUSE** 

22/03/2006

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	Shares and share	class allotted
Name ODF	Class of shares allotted	Number allotted
Address unable to inter here in the PDF		<b>L</b>
	_	<b>.</b>
UK Postcode LLLLL	L	L
Name Aureum Limited	Class of shares allotted	Number allotted
Address 13/15 Beverley Way	ORDINARY B	1,000
Cambridge		
UK Postcode C B 2 2 J S		
Name	Class of shares allotted	Number allotted
Address	_	,
UK Postcode LLLLL		
Name	Class of shares allotted	Number allotted
Address	1	Ł
UK Postcode	_   .	
UK Postcode Name	Class of shares	Number
<u>.                                    </u>	allotted	allotted
Address		
UK Postcode L L L L L L		. <b>L</b>
Please enter the number of continuation sheets (if any) attached to the	is form	
of Tollar and	Date 19/03/06	
A director / secretary / administrator / administrative receiver / receiver manager / re	<i>l</i> ( ——	delete as appropriate
ou do not have to give any contact		
formation in the box opposite but	····	
you do, it will help Companies louse to contact you if there is a		
uery on the form. The contact	Tel	
formation that you give will be	DV I	-