

Return of Allotment of Shares

Please complete in typescript, or in bold black capitals. CHFP000

Company Number

4859563				
	KENSA	MORINE	LIMITED	
7			,	

Company name in full	KENSA MORINE LIMITED			
Shares allotted (including bonus s	shares):			
·	From	То		
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)	18/10/40/04			
Class of shares (ordinary or preference etc)	ORD			
Number allotted	99			
Nominal value of each share	Z1			
Amount (if any) paid or due on each share (including any share premium)	£1			
List the names and addresses of the allo	ttees and the number of shares a	allotted to each overleaf		
If the allotted shares are fully or p	artly paid up otherwise than	n 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)				
	the Registrar of Companies	and signed the form send it to		



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Companies House, Crown Way, Cardiff CF14 3UZ For companies registered in England and Wales

Companies House, 37 Castle Terrace, Edinburgh EH1 2EB For companies registered in Scotland

DX 235 **Edinburgh**

Shareholder details	Shares and share	class allotte
Name STEPHEN JOHN RICHES	Class of shares allotted	Number allotted
Address	e services	
25 DURMING ROAD,	ORDINORY	74
ST. ACHES, CORMALL	_	
UK Postcode ブルミ しゅしゃ	<u> </u>	<u> </u>
Name THERESA DANK RICHES	Class of shares allotted	Number allotted
Address		
25 DURNING ROAD	_ ORDINGLY	<u> </u>
ST ACHE CORNER	_	<u> </u>
UK Postcode ブピビ しゅじん		<u> </u>
Name	Class of shares allotted	Number allotted
Address		L
		L
UK Postcode		
Name	Class of shares allotted	Number allotted
Address		
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UK Postcode しょししし		L
Name	Class of shares allotted	Number allotted
Address	·	. /
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UK Postcode		<u> </u>
Please enter the number of continuation sheets (if any) attached to this	s form	<u> </u>
Signed Alle Le	note ZS: 10:04	ے
Signed A director / secretary / administrator / administrative receiver / receiver manager / re	Date	delete as appropria
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ease give the name, address,		

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.

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106 HELST	·n Ro.	<u> </u>	PENRYA	
CORSHALL		•	Tel 0/326 376/15	
DX number		DX ex	change _	