

5178293

EZURIO LIMITED

Please complete in typescript, or in bold black capitals.

CHWP000

**Company Number** 

Company name in full

AOVVN850

COMPANIES HOUSE

Form revised 10/03

COMPANIES HOUSE

0716

26/08/05

03/08/05

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DX 235 Edinburgh or LP - 4 Edinburgh 2

**Return of Allotment of Shares** 

Shares allotted (including bonus	shares):	
	From	То
Date or period during which shares were allotted (If shares were allotted on one date enter that date in the "from" box)	Day Month Year	Day Month Year
Class of shares (ordinary or preference etc)	ORDINARY	
Number allotted	1000	
Nominal value of each share	1 pence	
Amount (if any) paid or due on each share (including any share premium)	£3	
List the names and addresses of the all		
If the allotted shares are fully or	partly paid up otherwise than in	ı 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)		de i med the forms and it to
	When you have completed and the Registrar of Companies at Companies House, Crown Way, Cardii	:

Companies House, Crown Way, Cardiff CF14 3UZ

Companies House, 37 Castle Terrace, Edinburgh EH1 2EB

For companies registered in England and Wales

For companies registered in Scotland

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

record.

Shareholder details	Shares and share	Shares and share class allotted		
Name EZURIO TRUSTEES LIMITED	Class of shares allotted	Number allotted		
Address UNITZ 126 COLINDALE AUF	ORDINARY	1000		
CONTON				
UK Postcode ひどら じげん		L		
Name	Class of shares allotted	Number allotted		
Address				
UK Postcode しこしにしに				
Name	Class of shares allotted	Number allotted		
Address				
UK Postcode				
Name	Class of shares allotted	Number allotted		
Address				
UK Postcode	L			
Name	Class of shares allotted	Number allotted		
Address				
L				
UK Postcode		_		
Please enter the number of continuation sheets (if any) attached to the	nis form			
Signed	Date 8 - 7-	) J		
A director / secretary / administrator / administrative receiver / receiver manager / r	<u>ecei</u> ver <i>Pleas</i> .	e delete as appropriate		
You do not have to give any contact  nformation in the box opposite but				
f you do, it will help Companies  -fouse to contact you if there is a				
query on the form. The contact information that you give will be	Tel			
visible to searchers of the public DX number	DX exchange			