## 88(2)

Please complete in typescript, or in bold black capitals.

## Return of Allotment of Shares

or in boid black capitals.	Return of Allotthent of Shares		
CHFP016			
Company Number	5255785		
Company name in full	PICASSO INVESTMENTS (PLANTATION WHARF) LIMITED		
	s shares): From	То	
Shares allotted (including bonu 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)	111/102/01014		
Class of shares (ordinary or preference etc.)	CRDINARY		
Number allotted	99		
Nominal value of each share	11		
Amount (if any) paid or due on each share (including any share premium)	11		
List the names and addresses of the a	allottees and the number of shares allotted to	each overleaf	
If the allotted shares are fully o	r partly paid up otherwise than in cas	h 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			

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 DX 235
For companies registered in Scotlland Edinburgh



contract is not in writing)

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

Shareholder details		Shares and share class allotted	
Name		Class of shares	Number
PRASO INVESTMENTS 1	4 MITEO	allotted	allotted
Address			
143 DOVER STREET		L OROINAR 1	99
IMAIFAIR LONDON		L	
UK Postcode	<b>の</b> す ひ 「 本 ら	<u> </u>	
Name		Class of shares allotted	Number allotted
Address			
<u>L</u>			
<u> </u>		· L	
UK Postcode			L
Name		Class of shares allotted	Number allotted
Address			i
		L	
1			I
UK Postcode			L
Name		Class of shares allotted	Number allotted
Address			
<u> </u>		L	L
		L	L
UK Postcode			<u></u>
Please enter the number of continua	tion sheets (if any) attached to this fo	orm O	
Signed	Date		
A director / secretary / administrator	/ administrative receiver / receiver mana	ger / receiver Please delete	e as appropriate
Please give the name, address, telephone number and, if available,	ASHCROFT CAMERON (UK) LTD		
a DX number and Exchange of the person Companies House should	RIVERS HOUSE FENTIMAN WALK		
contact if there is any query.	HERTFORD, HERTS SG14 1DB	Tel 01992 583200	)
	DX number	DX exchange	