

Please complete in typescript, or in bold black capitals. CHFP001

## 88(2)

**Return of Allotment of Shares** 

Compa	anv N	lumb	er
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5378184

Company name in full	G & P COMPUTING LIMITED				
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  2 8 0 2 2 0 0 5				
Class of shares (ordinary or preference etc)	Ordinary				
Number allotted ·	99				
Nominal value of each share	£1.00				
Amount (if any) paid or due on each share (including any share premium)	€99.00. <del>£1.00</del>				
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)					



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 Scotland Edinburgh

Shareholder details	Shares and share c	lass allotted
Name Patricia Gallacher Connell	Class of shares allotted	Number allotted
Address Glencorse Downs Road Compton NEWBURY	Ordinary	1
L	<u> </u>	L
UK Postcode RG20 6RE		
Name Graman Jour Convice.	Class of shares allotted	Number allotted
Address L Gris Colsis Downs Ross Compos Nawsmy	DRJ. Nom	98
UK Postcode RG20 GRS.	L	L
Name I	Class of shares allotted	Number allotted
Address	<u> </u>	L
UK Postcode	<u> </u>	<u> </u>
Name	Class of shares allotted	Number allotted
Address	L	L
LIK Postonio	<u> </u>	L
UK Postcode		
Name	Class of shares allotted	Number allotted
Address	L	L
UK Postcode		L
Please enter the number of continuation sheets (if any) attached to this form	n	
igned Wirmin & Date  A director / secretary / administrator / administrative receiver / receiver manager / receiver		ری delete as appropri
ease give the name, address, lephone number and, if available,		
DX number and Exchange of the erson Companies House should	Tel	·
ontact if there is any query.  DX number	DX exchange	