

## 88(2) Return of Allotment of Shares

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

**Company Number** 

6380964

Company name in full	QS Supplies Limited.		
Shares allotted (including bonus shares):			
Date or period during which shares were allotted shares were allotted on one date enter that date in the "from" box)	From To  Day Month Year Day Month Year  D3033005.		
Class of shares (ordinary or preference etc)	ORDINARY		
Number allotted	12		
Nominal value of each share	£1		
Amount (if any) paid or due on each share (including any share premium)	£1		
List the names and addresses of the allottees and the number of shares allotted to each overleaf			
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 For companies registered in England and Wales

DX 33050 Cardiff

or 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 allotted	
Name FAROOK Member.	Class of shares allotted	Number allotted
Address  33 ASHFIELD ROAD  LEICESTER.	LORDINARY	
UK Postcode LEZ = LLB.	<u> </u>	
Name  IBRAHM MEMBER.	Class of shares allotted	Number allotted
Address 28 Holyfred Avenue.	OLDINARY	6.
UK Postcode LE2-01G.		
Name  Address	Class of shares allotted	Number allotted
UK Postcode		L
Name	Class of shares allotted	Number allotted
Address		
UK Postcode		L
Name	Class of shares allotted	Number allotted
Address	_	L
UK Postcode		L
Please enter the number of continuation sheets (if any) attached to this	2/2/25	
A director x secretary / administrator / administrative receiver / receiver manager / rece		ete as appropriate
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.	Tol	

DX number

DX exchange