

Return of Allotment of Shares

Please complete in typescript, or in bold black capitals. CHWP000

Company Number

557	4130

Company Number	55 14130			
Company name in full	A. G. LAUDER LIMITED			
Shares allotted (including bor	านร shares):			
Date or period during which shares were allotted (If shares were allotted on one date enter that date in the "from" box)	From Day Month Year 2 6 9 2 90 5	To Day Month Year 216 0 9 2 0 0 5		
Class of shares (ordinary or preference etc)	Ordinary			
Number allotted	9			
Nominal value of each share	£1.00			
Amount (if any) paid or due on eac share (including any share premium)	£1.00			
List the names and addresses of the	e allottees and the number of shares allott	ted 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 For companies registered in Scotland

DX 235 Edinburgh

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

Shareholder details		Shares and share class allotted	
Name Anonem. Geor	ere LAUDER.	Class of shares allotted	Number allotted
Address 47 HEMINGFORD	Las	DROSNAZY	9
CANSLIVE		_	<u> </u>
UK Pa	ostcode CJI 384		L
Name		Class of shares allotted	Number allotted
Address		-	
L			
		.	
UK Po	ostcode	L	
Name		Class of shares allotted	Number allotted
Address		-	
UK Po	ostcode		
Name		Class of shares	Number
I		allotted	allotted
Address		-	
<u> </u>		_	
<u> </u>		_	<u> </u>
UK Po	ostcode		
Name		Class of shares allotted	Number allotted
Address		-	
L		_	
		_ L	L
UK Po	ostcode בבבבב		
Please enter the number of continu	ation sheets (if any) attached to this	form	,
	ation sheets (if any) attached to this		
Signed / / /	Da	ite 301 29 10 5	
A director / secretary / administrator / adr	ministrative receiver / receiver manager / rece	<u>siver</u> Please d	elete as appropriate
Please give the name, address,			
telephone number and, if available, a DX number and Exchange of the	PLENTED Y		
person Companies House should	1150 MILTON		
contact if there is any query.	CAMBRIDGE CBY IX	Ce Tel O1223	252024
	DX number	DX exchange	