

Please complete in typescript, or in bold black capitals.

CHFP025

88	8(2	
Return of A	llotment	of Shar	/

Company Number	0220100			
Company name in full	JUPITER ADRIA LONDON LIMITED			
Shares allotted (including bo	onus shares):			
Date or period during which	From	То		
shares were allotted	Day Month Year	Day Month Year		
if shares were aliotted on one date enter that date in the "from" box)	200420017			
Class of shares fordinary or preference etc)	ORDINARY			
Number allotted	99,999			
Nominal value of each share	£1 00			
Amount (if any) paid or due on each share (including any share premium)	£1 00			
List the names and addresses of the all	llottees and the number of shares allotted to each	h overleaf		
f the allotted shares are fully	y or partly paid up otherwise than ir	n cash please state:		
% that each share is to be				
reated as paid up		[
Consideration for which				
he 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				



LD6 23/04/2007 **COMPANIES HOUSE**

Companies House, Crown Way, Cardiff, CF14 3UZ For companies registered in England and Wales

DX 33050 Cardiff

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 det	er details Shares and share class allotte		class allotted
Name		Class of shares	Number
JUPITER ADRIA LIMITED		allotted	allotted
Address			
CUMBERLAND HOUSE, 1 VICTORIA S	<u> </u>	LORINDARY	99,999
HAMILTON, HM 11, BERMUDA			<u> </u>
UK Pos	tcode டடடடடட	L	<u> </u>
Name		Class of shares allotted	Number allotted
Address			
UK Pos	tcode		L
Name		Class of shares allotted	Number allotted
Address			
		L	<u> </u>
UK Pos	tcode		L
Name		Class of shares allotted	Number allotted
Address			
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UK Pos	tcode		
Name		Class of shares allotted	Number allotted
Address			
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UK Pos	tcode		L
<u> </u>			
Please enter the number of continuation	n sheets (If any) attached to this form	0	
- WHITTE DILLE	MITED Date		57
A director / secretary (a to) (A to	XXXXX XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	Please de	lete as appropriate
Please give the name, address, telephone number and, if available,	CMS Cameron McKenna LLP Ref. EAYU		
a DX number and Exchange of the person Companies House should	Mitre House, 160 Aldersgate Street, London, EC1A 4DD		
contact if there is any query	Tel 020 7367 3000		

DX number DX 135316

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