

Return of Allotment of Shares

Please complete in typescript, or in bold black capitals.

CHWP000

Company Number

6375466

Company name in full	MJCASHEVERYWAY LIMITED			
Shares allotted (including bor	nus shares):			
Silates anotica (moraumy po-	From	То		
Date or period during which shares were allotted (If shares were allotted on one date enter that date in the "from" box)	Day Month Year (0 1 0 3 2 0 0 8	Day Month Year 0 4 0 3 20 08		
Class of shares (ordinary or preference etc)	ORD			
Number allotted	5			
Nominal value of each share	£1			
Amount (if any) paid or due on each share (including any share premium)	th \$ 2,000			
List the names and addresses of the	he allottees and the number of shares allo	otted 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)				



27/06/2008 COMPANIES HOUSE

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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

For companies registered in Scotland

DX 33050 Cardiff

Companies House, 37 Castle Terrace, Edinburgh EH1 2EB

DX 235 Edinburgh

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

Shareholder details	Shares and share of	Shares and share class allotted	
Name BIZUNET GEURGES	Class of shares allotted	Number allotted	
Address 2 bis RUE MARZGAILE	(n)	_ ح	
91 , 90 BOISSY LE CUTTE		L	
UK Postcode		<u> </u>	
Name	Class of shares allotted	Number allotted	
Address		1	
UK Postcode			
Name	Class of shares allotted	Number allotted	
Address			
	_		
UK Postcode LLLLL		Niconbar	
Name	Class of shares allotted	Number allotted	
Address		L	
		<u> </u>	
UK Postcode			
Name	Class of shares allotted	Number allotted	
Address			
		<u> </u>	
UK Postcode			
Please enter the number of continuation sheets (if any) attached to the	als form	a 0	
Signed	Date	<u>. 08</u>	
A director / secretary / administrator / administrative receiver / receiver manager / rec	ceiver Please	delete as appropri	

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 MICHAEL MARTIN PARTNERSHIP LTD
Certified Accountants and
Registered Auditors
3 Queen Street
Ashford, Kent TN23 1RF Tel
Tel (01233) 633336 Fax. (01233) 633399

DX number DX exchange