

88(2)
Return of Allotment of Shares

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

Company Number

6476358

Company name in full

McINTYRE	Business	SERVICES	Las	

Shares allotted (including bonus shares):							
Date or period during which	From Cov. Month	To Year Month Year					
shares were allotted (If shares were allotted on one date enter that date in the "from" box)		ear Day Month Year					
Class of shares (ordinary or preference etc)	ORDINARY						
Number allotted	3						
Nominal value of each share	LI						
Amount (if any) paid or due on eac share (including any share premium)	th L1						
List the names and addresses of the	e allottees and the number of s	hares allotted to each overleaf					
If the allotted shares are fully	or partly paid up otherwis	e 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

Companies House, 37 Castle Terrace, Edinburgh EH1 2EB For companies registered in Scotland

DX 235 Edinburgh or LP - 4 Edinburgh 2

Form revised 10/03

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

Shareholder de	Shares and share class allotted				
Name · REBECCA MCINTYR	Class of shares allotted	Number allotted			
Address 63 BURNARY STREE	Deoinary				
UK Pos	tcode S6_ 2RA				
Name TIMOTHY BEN MCINTYRE	Class of shares allotted	Number allotted			
Address 63 BURNABY ST	DROWARY	_ 2			
UK Pos	tcode S6_ 2RA				
Name	Class of shares allotted	Number allotted			
Address		,	.		
UK Pos	tcode	L	L		
Name		Class of shares allotted	Number allotted		
Address			L		
UK Post	tcode	L	<u> </u>		
Name		Class of shares allotted	Number allotted		
Address					
L					
UK Post	tcode		L		
Please enter the number of continuati	on sheets (if any) attached to this for	orm			
Signed A director / secretary / administrator / admin	Dat	•	elete as appropriate		
You do not have to give any contact nformation in the box opposite but	·- ·- ·-	···-			
f you do, it will help Companies House to contact you if there is a					
query on the form. The contact	Tel				
information that you give will be visible to searchers of the public DX number record		DX exchange			