

Shares allotted (including bonus shares):

Return of Allotment of Shares

Please complete in typescript, or in bold black capitals.

CHWP000

Company Number

Company name in full

4474427	
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NASIM CONSULTING LIMITED

If the allotted shares are fully or partly paid up otherwise than in cash please state:

	From	То	
Date or period during which shares were allotted	Day Month Year	Day Month Year	
If shares were allotted on one date enter that date in the "from" box)	1 2 1 2 2 0 0 2		
Class of shares fordinary or preference etc)	ORDINARY		
Number allotted	98		
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 allo	ottees and the number of shares allo	tted to each overleaf	

% 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



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Shareholder details		Shares and share	Shares and share class allotted		
Name Mr Basharat MAlik		Class of shares allotted	Number allotted		
Address 21 Rowan Way Rassau		ORDINARY	68		
Ebbw Vale, Gwent					
UK Postco	ode NP235J	H			
Name. Mrs Heather Malik		Class of shares allotted	Number allotted		
Address 21 Rowan Way Rassau		ORDINARY	30		
Ebbw Vale, Gwent					
UK Postco	ode NP235J	Н	L		
Name		Class of shares allotted	Number allotted		
Address					
UK Posto			<u> </u>		
Name		Class of shares allotted	Number allotted		
Address					
<u> </u>					
LIK Poetr	code				
Name	oue LLLLL	Class of shares	Number		
		allotted	allotted		
Address					
UK Post	code/ L L L L L L		_		
Please enter the number of continuation	on sheets (if any) attached	d to this form			
11 1	N RESOURCES LTD 3262708	Date 24(1/03			
A director / secretary / administrator / admin	istrative receiver / receiver mana	ager / receiver Pleas	se delete as appropriate		
Please give the name, address, telephone number and, if available,	2ND F	ER ASSOCIATES FLOOR	<u> </u>		
a DX number and Exchange of the person Companies House should	20 HA	ADWAY CHAMBERS AMMERSMITH BROADWAY ON W678B			
contact if there is any query.		Tel			
	DX number	DX exchange			