the \emph{i} nformation bureau

formation \square information \square administration

88(2)

Return of Allotment of Shares

CHFP000				
Company Number	5783321			
Company name in full	PDS DESIGN LIMITED			
Shares allotted (including b				
Date or period during which Shares were allotted (if shares were allotted on one date enter the in the "from" box)	From To Day Month Year Day Month Year 1 8 0 4 2 0 0 6 1 8 0 4 2 0 0 6			
Class of shares (ordinary or preferences etc)	ORDINARY			
Number allotted	99			
Nominal value of each share	£1.00			
Amount (if any) paid or due on e share (including any share pren				
List the names and addresses	s of the allottees and the number of shares allotted 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 the duly stamped contract or by the stamped particulars on Form 88(3) contract is not in writing)	e duly			



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

For companies registered in England and vivales

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB DX 235 Edinburgh For companies registered in Scotland

Names and addresses of the allot	ttees (List joint share allotmer	nts consecutively)		
Shareholder d	_ 	Shares and share class allotted		
Name ALAN WILLIAM STRANGEWAY		Class of shares Allotted	Number allotted	
Address 5 KINGS CHASE		ORDINARY	99	
ROTHWELL, LEEDS				
UK Pos	stcode LS26 0HL			
Name		Class of shares Allotted	Number allotted	
Address				
L				
UK Po	stcode			
Name		Class of shares Allotted	Number allotted	
Address		_	1	
UK Pos	stcode			
Name		Class of shares Allotted	Number allotted	
Address			İ	
			1	
UK Po:	stcode			
Name		Class of shares Allotted	Number allotted	
Address		_		
UK Po	stcode			
Please enter the number of, continuation shee	at(e) (if any) attached to this form	1	«X»	
Signed Adrewallly	Date			
	administrative receiver / receiver man		ete as appropriate	
Please give the name, address,	THE INFORMATION BUREAU LIMITED			
Telephone number and, if available, A DX number and Exchange of the	23 HOLROYD BUSINESS CE	23 HOLROYD BUSINESS CENTRE, CARRBOTTOM ROAD, BRADFORD		
Person Companies House should	BD5 9UY	BD5 9UY Tel: 0870 751 2866		
Contact if there is any query.	DX number N/A DX exchange N/A			