

88(2)
Return of Allotment of Shares

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

Company Number

1003653

Company name in full

NPP Group plc	

Shares allotted (including bonus shares):

Date or period during which shares were allotted (If shares were allotted on one date enter that date in the "from" box)

From			10				
	Day	Month	Year		Day	Month	Year
	2 7	1 1	2 0 0 3				

Class of shares (ordinary or preference etc)

Number allotted

Nominal value of each share

Amount (if any) paid or due on each share (including any share premium)

ORDINARY	budo	ondo
300	300	300
10P	lop	100
3-40	2.63	3.40

List the names and addresses 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:

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

% that each share is to be

treated as paid up

contract is not in writing)

When you have completed and signed the form send it to the Registrar of Companies at:

A25 *AFBZ1RYP* 0314
COMPANIES HOUSE 22/01/04

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

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

DX 235 Edinburgh

DX 33050 Cardiff

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

	Shareholder details	Shares and share	class allotte
Name		Class of shares	Number
T1	ensea Travero	allotted	allotted
	og wyon st	ordo	_300
Ner	- Yall, 10019, 45P	<u> </u>	1
	UK Postcode L L L L L		
Name	Tronne Young	Class of shares allotted	Number allotted
Address	Avonne Young as above		
- L	,	ondo	_300
<u> </u>			L
	UK Postcode		L
Name	Yvonne Honna	Class of shares allotted	Number allotted
Address	Avoure Houng		_30O
	UK Postcode		<u> </u>
Name		Class of shares allotted	Number allotted
Address			
	UK Postcode		
Name		Class of shares allotted	Number allotted
Address			
l			
	UK Postcode		L
Please enter the	number of continuation sheets (if any) attach	ed to this form	
igned	- Commence of the second	Date	94
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Please give the name,	address,		
elephone number and,	if available,		
DX number and Excherson Companies Hou			
ontact if there is any q		Tel	
	DX number	DX exchange	