

for the record

Return of Allotment of Shares

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

Company Number

Company name in full

1003653	
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NPP Group pic		ne	

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	ORDINARY	ORDINARY	
300	300	300	
10P	10P	10P	
2.69	3-4-0	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:

% 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)

		 	
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COMPANIES HOUSE

22/01/04

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

DX 235 Edinburgh

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

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

Shareholder details	Shares and share	Shares and share class allotted		
Name Penelope Leigh Address Research Lit!	Class of shares allotted	Number allotted		
	ORDINARY	300		
6/7 Grosvenor Pl Landon		300		
UK Postcode ふどんとこら上				
Name Penelope beigh	Class of shares allotted	Number allotted		
Address as arone	ORDINARY	_300_		
UK Postcode				
Name James Parry	Class of shares allotted	Number allotted		
Address As above	ORDINARY	300		
UK Postcode	L			
Name	Class of shares allotted	Number allotted		
Address		L		
UK Postcode		L		
Name	Class of shares allotted	Number allotted		
Address				
L		L		
UK Postcode		L		
Please enter the number of continuation sheets (if any) attached to	this form			
A director / secretary / administrator / administrative receiver / receiver manager	Date 15 (01)	delete as appropriate		
Please give the name, address,				
elephone number and, if available, a DX number and Exchange of the				
person Companies House should contact if there is any query.	T-1			
DX number	Tel DX exchange			