

Return of Allotment of Shares

Please complete in typescript, or in bold black capitals. CHFP000

Company Number

2703364	
ALMAID LIMITED	

Company name in full	ALMAID LIMITED		
Shares allotted (including bon	us shares):		
Date or period during which shares were allotted (If shares were allotted on one date enter that date in the "from" box)	From Day Month Year 2 9 0 3 2 0 0 0	To Day Month Year	
Class of shares (ordinary or preference etc)	ORDINARY A		
Number allotted	10,000		
Nominal value of each share	£1.00		
Amount (if any) paid or due on each share (including any share premium)	E1.00		
List the names and addresses of the	allottees and the number of shares allo	tted to each overleaf	
If the allotted shares are fully o	or partly paid up otherwise than in	ı 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 the Registrar of Companies at:	_	



Form revised January 2000

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

lames and addresses of the allottees	(List joint share allotments consecutively)
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Shareholder details	Shares and share o	lass allotted
Name R. DATE	Class of shares allotted	Number allotted
Address SO GOETRE FACH ROAD KILLAY SWANSEA	A ORDINARY	5,000
UK Postcode LLLL		<u> </u>
Name A.V.L. DAVIES	Class of shares allotted	Number allotted
Address 36 BISHOPSTON ROAD BISHOPSTON SWANSFA	A ORDINARY	2,000
UK Postcode کے کے کے رغ کے رغ		<u> </u>
Name W. STEWART	Class of shares allotted	Number allotted
Address 61 KILLAN ROAD DUNVANT SWANSEA	A ORDINARY	3,000
UK Postcode	<u> </u>	<u> </u>
Name	Class of shares allotted	Number allotted
Address		L
		L
UK Postcode		
Name	Class of shares allotted	Number allotted
Address		
		<u> </u>
UK Postcode		1
Please enter the number of continuation sheets (if any) attached to this	form	
Signed K. m. Reed Da	te 12 4 2000	<u> </u>
A director secretary / administrator / administrative receiver / receiver manager / rece	iver Please de	elete as appropriate
Please give the name, address,		

Please give the name, address, telephone number and, if available, a DX number and Exchange of the person Companies House should contact if there is any query.

KIRSTEEN	REED	
S BRYNAEI	CON COURT	DUNVANT
SWANSEA	SA27xB TE	101792 206740
DX number DX exchange		