

Return of Allotment of Shares

Please complete in typescript, or in bold black capitals CHWP000

Company Number

04992207

Company name in full

34S 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)

	Fro	ſτι		I	O		
Day	Month	Year	Day	Month		Year	
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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					
2890		•			
£0 25					
64p					

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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12/06/2007 **COMPANIES HOUSE** 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

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

Shareholder de	etails	Shares and share	class allotte
Name OMX SECURITIES NOMINEES LIF	MITED	Class of shares allotted	Number allotted
Address PARTICIPANT ID 69XHN MEMBER AC	COUNT KKCLT	ORDINARY	2,890
CANTERBURY HSE, 85 NEWHALL STR	EET, BIRMINGHAM		
UK Pos	tcode B3 _ 1 L H		L
Name		Class of shares allotted	Number allotted
Address			
			L
UK Pos	tcode		L
Name		Class of shares allotted	Number allotted
Address		_	
			<u> </u>
UK Pos	tcode		<u> </u>
Name		Class of shares allotted	Number allotted
Address			
		_	L
UK Pos	tcode		
Name		Class of shares allotted	Number allotted
Address		_	
UK Pos	tcode		<u> </u>
Please enter the number of continuat	ion sheets (if any) attached to th	is form	-
igned Pat		Date 11 JUNE 20	007
A director / secretary / edministrator / admir	natrative receiver / receiver manager / re	ncewe r Please	delete as appropnat
lease give the name, address, elephone number and, if available,			
DX number and Exchange of the erson Companies House should			
ontact if there is any query		Tel	
	DX number	DX exchange	