

Return of Allotment of Shares

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

Company Number

4992207	
GROUP 4 SECURICOR PLC	
	·

Company name in full	GROUP 4 SECURICOR 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 To Day Month Year Day Month Year 1 3 0 9 2 0 0 5				
Class of shares (ordinary or preference etc)	ORDINARY				
Number allotted	5255				
Nominal value of each share	£0.25				
Amount (if any) paid or due on each share (including any share premium)	ch 0.64				
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)					

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

AU1 COMPANIES HOUSE

16/09/05

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 MR GEORGE VELANTZAS		Class of shares allotted	Number allotted	
Address 1ST FLOOR, 45 FULHAM BROADWAY	ROAD,	ORDINARY	5,255	
LONDON			L	
UK Po	stcode S N 6 1 A	E	L	
Name		Class of shares allotted	Number allotted	
Address				
L			h	
UK Po	stcode	_		
Name		Class of shares allotted	Number allotted	
Address			,	
			<u> </u>	
UK Po	stcode		L	
Name		Class of shares allotted	Number allotted	
Address			,	
			1	
UK Po	stcode		L	
Name		Class of shares allotted	Number allotted	
Address				
L			L	
UK Po	stcode LLLLL	L	L	
Please enter the number of continua	ition sheets (if any) attached	to this form		
Signed	· · · //	Date		
A director / secretary / administrator / adm	ninistrative receiver-mana		delete as appropriate	
Please give the name, address, relephone number and, if available,				
a DX number and Exchange of the person Companies House should				
contact if there is any query.		Tel	 	
	DX number	DX exchange		