

for the record

Return of Allotment of Shares

To

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

4992207

Com	panv	name	in	full
~~	pany			

GROUP 4 SEC	URICOR PLC	

From

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)

Day	Month	 Year	Day	Month	•	Year	
1 4	0 6	2 0 0 5					

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		
60000		
£0.25		
85p		

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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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 details		Shares and share class allotted		
Name PERSHING KEEN NOMINEES L	IMITED	Class of shares allotted	Number allotted	
Address PARTICIPANT ID 601 MEMBER ACC	OHNT KKCI T	ORDINARY	60,000	
CAPSTAN HSE, ONE CLOVE CRESCI				
<u> </u>	ostcode E 1 4 2 B H			
Name		Class of shares allotted	Number allotted	
Address				
		<u></u>	<u> </u>	
UK Po	estcode		- L	
Name		Class of shares allotted	Number allotted	
Address				
L	***************************************	,		
UK Po	ostcode			
Name	100	Class of shares allotted	Number allotted	
Address	100			
UK Po	ostcode			
Name	-	Class of shares allotted	Number allotted	
Address				
1				
UK Po	ostcode			
Please enter the number of continu	ation sheets (if any) attached to this t	form	,	
Signed		te17-6-05		
$\overline{}$	ministrative resciver / receiver manager / resei	•	e 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.		Tel		
· · ·	DX number	DX exchange		