



# 88(2)

Please complete in typescript,  
or in bold black capitals.

## Return of Allotment of Shares

CHFP005

Company Number

4693951

Company Name in full

KEN GAMBLE INTERNATIONAL HORSE TRANSPORT LIMITED

### 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

10 04 2003

Day Month Year

10 04 2003

Class of Shares  
(ordinary or preference etc).

ordinary

Number allotted

99

Nominal value of each share

£1

Amount (if any) paid or due on each  
share (including any share premium)

-

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:

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



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COMPANIES HOUSE

12/04/03

Form revised January 2002

Shareholder details		Shares and share class allotted	
Name Mr. K. W. GAMBRE	Class of shares allotted	Number allotted	
Address 1, ASHDALE CLOSE, ALDSWORTH CHELTENHAM, GLOS	Ordinary	99	
UK PostCode G1 4 5 4 3 PT			
Name	Class of shares allotted	Number allotted	
Address			
UK PostCode			
Name	Class of shares allotted	Number allotted	
Address			
UK PostCode			
Name	Class of shares allotted	Number allotted	
Address			
UK PostCode			
Name	Class of shares allotted	Number allotted	
Address			
UK PostCode			
Name	Class of shares allotted	Number allotted	
Address			
UK PostCode			

Please enter the number of continuation sheet(s) (if any) attached to this form

Signed



Date

10. 4. 2003

A director / secretary / administrator / administrative receiver / receiver manager / receiver

Please delete as appropriate

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.

A. J. Turner Co COLTS PARK,	
EGLINGHAM, CHELTENHAM, WILTS	
SNIS 5BT	Tel 01666 829 324
DX Number	DX Exchange