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| Please complete in typescript, | οг | in |
|--------------------------------|----|----|
| bold black capitals. | | |

Annual Return

CH

| old black capitals. | | |
|--|---|--|
| HFP000 | Company number | 15967553 |
| | ipany name in full | MALLOW LTD |
| Oom | pany name in rui | |
| Date of this retur The information in this | | Day Month Year 1 6 / 1 0 / 2 0 0 8 |
| earlier than the annive please show that date | ur next return to a date rsary of this return here. Companies | Day Month Year |
| House will then send a appropriate time: | a form at the | |
| Registered Offic Show here the address this return | | 1ST FLOOR LADYWELL HOUSE BUILDING HURST STREET |
| Any change of registered office | Post town | BIRMINGHAM |
| must be notified on form 287 | County/Region | WEST MIDLANDS |
| | UK Postcode | B 5 L 4 B N |
| Principal busine | | 0THER HUMAN HEALTH ACTIVE |
| Show trade classificat the principal activity or | ion code number(s) for r activities | |
| If the code number ca give a brief description | | |
| | | |





13/12/2008 COMPANIES HOUSE

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

Companies House, Crown Way, Cardiff, CF14 3UZ
for companies registered in England or Wales
Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB
For companies registered in Scotland

DX 23050 Cardiff
DX ED235 Edinburgh 1
or LP-4 Edinburgh 2

Page 1

| Register of members If the register of members is not ke registered office, state here where | | L | |
|--|------------------------------------|---|--|
| 0 | | 1 | |
| Cou | inty/Region | | |
| U | K Postcode | | |
| | holders, or a eart of it, which | | |
| Company type | | | |
| Company type | | <u> </u> | |
| Public limited company | | | |
| Private company limited by Private company limited by | | out 🗸 | |
| share capital | - | | |
| Private company limited by section 30 Private company limited by under section 30 | • | | ne appropriate box |
| Private unlimited company | with share capi | tal | |
| Private unlimited company | without share c | apital | |
| Company Secretary | | Details of a new company secretary must | be notified on form 288a |
| Voluntary details (Please photocopy Name | *Style/Title | i MRS | |
| this area to provide details of joint | Forename(s) | <u> </u> | ······································ |
| secretaries). | Surname | | |
| †† Tick the box if the address shown is a service address for the | | | |
| beneficiary of a Confidentiality Order granted under section | Address †1 | 5 RAYNOR ROAD FALLING PARK | |
| 723B of the Companies Act 1985. Otherwise, | | | |
| give your usual residential address. In | | WOLVERHAMPTON | |
| the case of a corporation or Scottish firm, give the registered or principal | County/Region | WEST MIDLANDS | |
| office address. | UK Postcode | | |
| If a partnership, give the names and addresses of the partners or the name of the partnership and office address | Country | ENGLAND | |
| | | | |

Page 2

| Directors Please list the directors in alphabetical order * Voluntary details In the case of a | | tical order | Details of new directors must be notified on form 288a |
|---|----------|---|--|
| director that is a corporation or a | Name | *Style/Title | MR |
| Scottish firm, the name is the | | | Day Month Year |
| corporate or firm name | | | 0 9 1 0 8 1 1 9 4 8 |
| | | Forename(s) | HON SUN |
| †† Tick the box if the | | Surname | но |
| address shown is a service address for th | е | _ Address †† | 72 PRINCESS ROAD |
| beneficiary of a Confidentiality Order granted under section | , | | EDGBASTON |
| 723B of the Companie Act 1985. Otherwise, | | Post town | BIRMINGHAM |
| give your usual residential address. In the case of a | , c | ounty/Region | WEST MIDLANDS |
| corporation or Scottis firm, give the register or principal office | h | | B 5 |
| address. | | Country | ENGLAND |
| | | Nationality | BRITISH |
| | Busine | ss occupation | BUSINESSMAN |
| Directors Please list the directors * Voluntary details In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name †† Tick the box if the address shown is a service address for th beneficiary of a Confidentiality Order granted under section 723B of the Compani Act 1985. Otherwise, give your usual residential address. I the case of a corporation or Scottle firm, give the register or principal office address. | Name nes | *Style/Title Date of birth Forename(s) Surname Address †† Post town County/Region UK Postcode Country Nationality | Day Month Year |
| | | | |

| Issue share capital Enter details of all the shares in issue at the date of this return | Class (e.g. Ordinary/Preference) | Number of shares issued | Aggregate Nominal Value (i.e. Number of shares issued multiplied by nominal value per share, or total amount of stock) |
|--|--|--------------------------------------|--|
| | ORDINARY | | [1 |
| | | | |
| | L | <u></u> | |
| | Totals | 1 | 1 |
| Traded public companies A traded public company means a company any of whose shares are shares admitted to trading on a regulated market | Please tick this box if your of public company at any time this return | | |
| List of past and present shareholders (use attached schedule where appropriate) | Please tick the appropriate t | box below: | On paper In another format |
| Private or non-traded public companies are required to provide a "full list" if one was not included with either of the last two returns. | A full list of shareholders for company is enclosed. Pleas | se complete Schedule A. | |
| Traded public companies are required to provide a list of shareholders who held at least 5% of the issued shares of any share class if a list was not provided with either of the last two | A list of shareholders holdin shares of any share class for enclosed. Please complete | or a traded public company | y is |
| returns. | A list containing shareholde | | |
| | → For private or non-tra complete Schedule | aded public companies, pl A | ease |
| | → For traded public cor Schedule B | mpanies, please complet e | e |
| | There were no shareholder | changes in this period | \checkmark |
| Certificate | I certify that the information knowledge and belief | given in this return is true | [- |
| Signed | YAVLING 2HA | 0 | Date 10/2/201 |
| * Please delete as appropriate When you have signed the return, send it with the fee to the Registrar of Companies. Make cheques payable to Companies House. | This return includes | O continuation sheets (enter number) | s |
| You do not have to give any contact information in the box opposite but if | L | | |
| you do, it will help Companies House to contact you if there is a query on the form. The contact information that you | | OUSE, 31 HURST STREE | <u> </u> |
| give will be visible to searchers of the public record. | DX number | DX exchange | |
| | | | Page 4 |

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| Directors Please list the directors in alphabetical order * Voluntary details In the case of a director that is a | | tical order | Details of new directors must be notified on form 288a |
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| director that is a corporation or a Scottish firm, the | Name | *Style/Title | |
| name is the corporate or firm name | | Date of birth | Day Month Year |
| | | Forename(s) | |
| †† Tick the box if the | | Surname | <u></u> |
| address shown is a service address for th beneficiary of a | e | Address †† | |
| Confidentiality Order granted under section 723B of the Companie | | J | |
| Act 1985. Otherwise, give your usual residential address. Ir | 1 | | |
| the case of a corporation or Scottis firm, give the register | h | ounty/Region | |
| or principal office address. | - u | UK Postcode | |
| | | Country | |
| | 5 | | 1 |
| | Busines | ss occupation | |
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| Directors Please list the directors * Voluntary details In the case of a | in alphabetical order | Details of new directors must be notified on form 288a |
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| †† Tick the box if the address shown is a service address for th | | ss †† |
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| granted under section 723B of the Companion Act 1985. Otherwise, give your usual | 95 | town |
| residential address. I the case of a | n County/Re | gion |
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