



88(2)

Return of Allotment of Shares

CHFP096

Company Number

6156972

Company Name in full

24 ELECTRICAL SOLUTIONS 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	Day	Month	Year
13	03	2007	13	03	2007

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)

£1

List the names and addresses of the allottees and the number of shares allotted to each overleaf

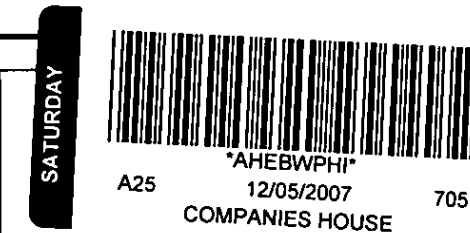
If the allotted shares are fully or partly paid up otherwise than in cash please state:

% that each share is to be treated as paid up

100

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)

CASH



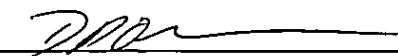
When you have completed and signed the form send it to the Registrar of Companies at:

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 <u>DAVID PAUL OLVER</u>	Class of shares allotted	Number allotted
Address <u>WOODSIDE, PARKSTONE ROAD,</u> <u>ROPLEY, HAMPSHIRE</u>	<u>ORDINARY</u>	<u>99</u>
UK Postcode <u>SO240EW</u>		
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 10/5/07.

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

<u>LANDI ACCOUNTING</u>	
Tel _____	
DX number _____	DX exchange _____