

Company or Trust in which investment is held – THIS MUST BE COMPLETED



Link Market Services Limited
PO Box 91976, Auckland, 1142
DX CP23524
Phone: +64 9 375 5999
Fax: +64 9 375 5990
Investor Enquiries: +64 9 375 5998
Email: Imsenquiries@linkmarketservices.com
Web: www.linkmarketservices.com

Full Name(s) of Registered Holding

Registered Address

 Postcode

CSN/HOLDER NUMBER

A CHANGE OF DETAILS NOTIFICATION

PLEASE COMPLETE THIS FORM IN BLACK INK USING CAPITAL LETTERS. PHOTOCOPIES WILL NOT BE ACCEPTED.

If a name correction is made, the declaration on the reverse must be completed.

Name Correction – Note: This form cannot be used if there is a change of ownership or change of name.

New Address Details – PO Box or other information

PO Box/Private Bag/Care of (c-)/Property names/Building names (if applicable)

Unit Number/Level

Street Number

Street Name

Suburb/Town

Post Code

B SIGNATURE(S) OF SECURITYHOLDER(S) – THIS MUST BE COMPLETED

Securityholder 1 (Individual)

Joint Securityholder 2 (Individual)

Joint Securityholder 3 (Individual)

Director

Director/Authorised Signatory (delete one)

Sole Director/Authorised Signatory (delete one)

This form should be signed by the securityholder. If a joint holding, all securityholders should sign. If signed by the securityholder's attorney, the power of attorney must have been previously noted by the registry or a certified copy attached to this form. If executed by a company, the form must be executed in accordance with the securityholder's constitution and the New Zealand *Companies Act 1993*.

Date

CHANGE OF DETAILS NOTIFICATION (continued)

If you are requesting a change of name, please include the following documentation when you return this form:

A certified copy of the legal document evidencing your change of name, such as a marriage certificate or deed poll.

This form cannot be used to change ownership or to change from a joint holding to an individual holding or vice versa.

If you have changed address please complete that section.

Signing Information

This Notice must be signed by the securityholder or be signed by the securityholder's attorney. If this Notice is signed by a person who is not the registered securityholder, then the relevant authority (eg power of attorney) for the person signing must either have been exhibited previously to the Share Registrar or a certified copy must be enclosed with this Notice.

NAME CORRECTIONS REQUEST DECLARATION AND INDEMNITY

PLEASE COMPLETE THIS FORM IN BLACK INK USING CAPITAL LETTERS. PHOTOCOPIES WILL NOT BE ACCEPTED.

I/We

--

do hereby state that:

1. the true and correct name is

--

2. and is one and the same as

--

There has been no change of ownership of the securities. In consideration of the Company amending the register, I/we hereby indemnify and forever keep indemnified each of the Company and its Agents, from and against all losses and all claims, actions, proceedings, demands, costs and expenses which may be made or brought against any of them by reason of this request.

SIGNATURE(S) OF SECURITYHOLDER(S) – THIS MUST BE COMPLETED

Securityholder 1 (Individual)

--

Director

Joint Securityholder 2 (Individual)

--

Director/Authorised Signatory (delete one)

Joint Securityholder 3 (Individual)

--

Sole Director/Authorised Signatory (delete one)

This form should be signed by the securityholder. If a joint holding, all securityholders should sign. If signed by the securityholder's attorney, the power of attorney must have been previously noted by the registry or a certified copy attached to this form. If executed by a company, the form must be executed in accordance with the securityholder's constitution and the New Zealand *Companies Act 1993*.

Date

/ /

--

Name of Witness

--

Signature of Witness

Witness signature(s) who certifies that the person(s) who has/have signed this statement is/are known to him/her and has/have signed with his/her signature(s) in his/her presence.