

PROXY REVOCATION FORM

DHIVEHI RAAJJEYGE GULHUN PLC

MEMBER DETAILS:

Full Name:	
Address:	
ID Card/Passport No:	
Contact No:	

DECLARATION

I, the undersigned shareholder of Dhiraagu declare that I wish to revoke the following proxy holder;

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Which I had appointed through my proxy form dated

Date:

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The Shareholder
(Signature)

[Legal entities please add Company's
Stamp]

Please submit the completed and signed form to
Dhiraagu Head Office, Ameenee Magu, Male', Maldives on or before 16:00hrs on the
16th of April 2015

Alternatively, please email completed a signed form to:
investor-relations@dhiraagu.com.mv on or before 19:30 hours before 16 April 2015.

