

# PROXY FORM

Nanopac Innovation Limited,  
31 Highgate CCt  
Kellyville, NSW 2155 Australia  
andrew@dashcl.com.au

I, \_\_\_\_\_  
of \_\_\_\_\_  
being a member of Nanopac Innovation Limited (the "Company")  
Number of Shares to which this proxy represents [ \_\_\_\_\_ ] \_\_\_\_\_

## SECTION A

**APPOINT** \_\_\_\_\_ or failing him/her the Chairman of the meeting as my proxy to vote on my behalf at the 2024 Annual General Meeting of the Company to be held on the 31<sup>st</sup> day of May 2024 and at any adjournment of the meeting. The proxy so appointed shall represent all my voting rights except those (if any) specified in Section B below.

## SECTION B (Do not complete unless you wish to appoint two proxies)

I further appoint \_\_\_\_\_ of \_\_\_\_\_ as my proxy to vote on my behalf at the said meeting and at any adjournment of the meeting. The proxy appointed by this section B shall represent my voting rights in respect of \_\_\_\_\_ shares.

DATED [ \_\_\_\_\_ ] 2024

Signed by: \_\_\_\_\_

- Corporate members shall execute the proxy under seal or by signature of a duly appointed officer or attorney. If not executed under seal proof of authority to sign the proxy must be submitted.

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Should you desire to direct your proxy how to vote please insert "X" in the appropriate box against each item below, otherwise your proxy may vote as he thinks fit or abstain from voting in respect of that item.

### **Business Item**

| Ordinary Business              | <i>For</i>               | <i>Against</i>           | <i>Abstain</i>           |
|--------------------------------|--------------------------|--------------------------|--------------------------|
| 2. RENUMERATION REPORT         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. ELECTION OF CHENG KOK LEONG | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Special Business               |                          |                          |                          |
| 4. CONSOLIDATION               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |