

## Information Update Form for Corporate Shareholders

<u>Share</u>	hole	ders	' N	ame	(Ar	abic	<u>.)_</u>	• • • • • • • • • • • • • • • • • • • •				• • • • •			• • • •		• • • •		• • • •	• • • •		••••			
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Compa	any	Tel.	. (M	landa	itory	'):													•••						•••
Mobile of Contact Person (Mandatory):																									
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Please fill the fields below to transfer your cash dividends (all fields are mandatory except																									
SWIFT	<u>「)</u>																								
Bank r	nam	e: .									Bı	ranc	:h: .												
Benefi	ciar	y Na	ame	e (En	glish	):																			<b></b>
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Name	of a	auth	oriz	ed si	gna	tory:										Da	ite:								
Signat	ure	·																							

## Attachments:

A copy of certificate of authorized signatories of the company.

A copy of the commercial registrar of the company.