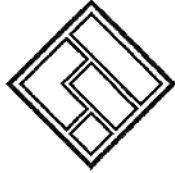


ASIC registered agent number N/A  
 lodging party or agent name SAN REMO DISTRICT FINANCIAL SERVICES  
 office, level, building name or PO Box no PO BOX 101  
 street number & name SAN REMO  
 suburb/city \_\_\_\_\_ state/territory VIC postcode 3925  
 telephone (03) 59567177  
 facsimile ( ) \_\_\_\_\_  
 DX number \_\_\_\_\_ suburb/city \_\_\_\_\_

ASS. CASH. PROC.	<input type="checkbox"/>	REQ-A REQ-F	<input type="checkbox"/>
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Australian Securities & Investments Commission

form **909**

Notification of **office at which register is kept**

Corporations Act 2001  
**100(1)(d), 172, 271, 1302(4)**  
**601CZC**

company name SAN REMO DISTRICT FINANCIAL SERVICES  
 A.C.N. 102 770 150

**Details of Register**

- Register of members
- Register of options
- Register of charges
- Register of holders of debentures
- Register of debenture holders for non-companies

**Details of change**

- change from registered office date of change (d/m/y) 2/01/07
- change from principal place of business date of change (d/m/y) / /
- change from other address date of change (d/m/y) / /

Details of other address where changed from:

at the office of SAN REMO DISTRICT FINANCIAL SERVICES  
 office, level, building name \_\_\_\_\_  
 street number & name 103A MARINE PARADE  
 suburb/city SAN REMO state/territory VIC postcode 3925

**New address**


at the office of ESSENTIAL REGISTRY TEAM  
 office, level, building name COMPUTER SHARE INVESTOR SERVICES PTY LTD  
 street number & name YARRA FALLS  
 suburb/city 452 JOHNSTON STREET state/territory VICTORIA postcode 3067  
 Does the company occupy these premises?  yes  no

If NO, name of occupier COMPUTER SHARE INVESTOR SERVICES

occupier's consent (Tick box to assent to statement required by subsection 100(1)(d))

- The occupier of the premises has consented in writing to the use of the new address as the place for keeping of the register and has not withdrawn that consent.

**Signature**

print name CATHERINE ROGERSON capacity COMPANY SECRETARY  
 sign here  date 16/01/07

Small Business (less than 20 employees), please provide an estimate of the time taken to complete this form

**Include**

- The time actually spent reading the instructions, working on the question and obtaining the information
- The time spent by all employees in collecting and providing this information

- hrs 45 mins