# AYM Syntex Limited

(Corporate Identification Number – L99999DN1983PLC000045)

**Reg. Office:** Survey No. 394 (P), village Saily, Silvassa, (U. T.) Dadra & Nagar Haveli
Tel. No. +91-260-2640596/2640599, Fax No. + 91 260-2640597,

**Corp. Office:** Trade world, 'B' wing, 9th floor, Kamala city, Senapati Bapat Marg, Lower Parel (W), Mumbai– 400013
Email: allcompanysecretaryofaymsl@aymgroup.com; website: www.aymsyntex.com

## PROXY FORM

(Pursuant to Section 105(6) of the Companies Act, 2013 and Rule 19(3) of the Companies (Management and Administration) Rules, 2014

Name of the member (s):_____

Registered Address: _____

_____

E-mail Id: _____

Folio No / Client ID | | | | | | | | | | | | | | | | |

DP ID | | | | | | | | | | | | | | | | |

I/ We _____ being the member(s) of Equity Shares of the above named company, hereby appoint:

1. Name :_____
   Address: _____
   E-mail Id:_____
   Signature: _____or failing him
2. Name) :_____
   Address: _____
   E-mail Id:_____
   Signature: _____ or failing him
3. Name) :_____
   Address: _____
   E-mail Id:_____
   Signature: _____

as my / our proxy attend and vote (on a poll) for me / us and on my / our behalf at the 36th Annual General Meeting of the Company to be held on **Thursday, 19th September 2019 at 12.00 Noon** at the Registered Office of the Company at and at any adjournment thereof in respect of such resolutions as are indicated below :

| Item No. | Subject of the Resolution |
|---|---|
| 1 | Consider and adopt the Audited Financial Statement, Report of Board of Directors and Auditors thereon for the Financial year ended 31st March 2019 |
| 2 | Re-appointment of Mr. Rajesh R Mandawewala (DIN:00007179) as a Director of the Company, liable to retire by rotation |
| 3 | Appointment of Mrs. Khushboo Mandawewala (DIN: 06942156) as Director of the Company |
| 4 | Appointment of Mrs. Khushboo Mandawewala (DIN: 06942156) as a Whole time director of the Company |
| 5 | Amendment in AYM ESOP Scheme 2018 |
| 6 | Ratification of remuneration payable to Cost Auditor |

Signed this …….. day of ……2019.

Signature of shareholder

Affix Re. 1 Revenue stamp

Signature of Proxy Holder(s): 1)_____ 2)_____ 3)_____

**Note:**

The Form of proxy in order to be effective should be duly completed and deposited at the Registered Office of the Company, not less than 48 hours before the commencement of the Meeting.