



MALDIVES ISLAMIC BANK

REGISTRATION FORM

EXTRAORDINARY GENERAL MEETING 01/2026

SECTION A SHAREHOLDER DETAILS

Full Name: _____
NID No./PP No./Company Registration No. _____
Current Address _____
Email Address _____ Mobile Number _____
MSD Account No (optional) _____ No. of shares (optional) _____

SECTION B GUARDIANSHIP DETAILS

To be filled for shareholders under the age of 18 years, or those subject to legal guardianship

Full Name of the Parent/Guardian _____
National ID No. of Parent/Guardian _____
Mobile No. of Parent/Guardian _____
Current Address _____

SECTION C PROXY INFORMATION

To be filled only if the shareholder wishes to appoint a proxy to attend the EGM on their behalf

Full Name _____ Mobile No.: _____
NID No./PP No. _____ Email Address: _____
Current Address: _____

DECLARATION OF THE PROXYHOLDER

To be filled only if the shareholder wishes to appoint a proxy to attend the EGM on their behalf

- I hereby confirm my consent to act as proxyholder for the above-named shareholder and declare that I shall exercise my voting rights in accordance with applicable laws and regulations and the voting choice of the shareholder.

Signature _____

Date _____

DECLARATION OF THE SHAREHOLDER

- I/We confirm that the information provided in this form is correct and true.
- Where a proxy is appointed, I/We declare that the proxy described herein is appointed to attend, participate and vote at the Extraordinary General Meeting 01/2026 of Maldives Islamic Bank PLC. to be held on 10th November 2026, on my/our behalf. I/We agree that this proxy appointment is valid only for the said Meeting.
- By appointing the above-named proxyholder, I/we acknowledge and accept the applicable proxy voting arrangements of "Fahivote" system and agree that the vote cast by the proxyholder on my/our behalf shall be treated as my/our vote for the relevant resolution.

Signature _____

Date _____

Seal/Stamp
(For institutions only)

NOTES

- Individual shareholders shall submit ID Card copy/ PP Copy of the shareholder, and NID/PP copy of proxy holder (if applicable), along with the form.
- Shareholders other than individuals shall submit the form signed by an authorized signatory of the entity and may submit a Copy of the Board Resolution along with the ID card copy or PP copy of the appointed proxy.
- For shareholders under the age of 18 and those subject to guardianship, please submit an ID card copy or PP copy of parent/guardian.
- Any person signing the form as a guardian of a shareholder by virtue of a legal guardianship order must submit a copy of such order along with the form.
- Guardian on record shall sign for shareholders under the age of 18 years or for those subject to a legal guardianship order.
- Please email the completed form and supporting documents to investor.relations@mib.com.mv.

FOR OFFICE USE ONLY

Verified & Registered by
Name: _____

Date: _____

Signature: _____