

# Manaksia Steels Limited

PROXY FORM

Regd. Office : Bikaner Building, 3rd Floor, 8/1 Lal Bazar Street, Kolkata- 700 001  
Phone No. : +91-33-2231 0050; Fax No. : +91-33-2230 0336  
Email : infomsl@manaksia.com; Website : www.manaksia.com  
Corporate Identity Number : L27101WB2001PLC138341

MGT - 11

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

Name of the Member(s) : .....

Registered Address : .....

Email Id : .....

Folio No/Client ID : .....

DP ID : .....

I/We, being the member(s) of \_\_\_\_\_ Shares of Manaksia Steels Limited, hereby appoint:

1. Name : ..... Email Id: .....

Address : .....

Signature : ..... or failing him/her

2. Name : ..... Email Id: .....

Address : .....

Signature : ..... or failing him/her

3. Name : ..... Email Id: .....

Address : .....

Signature : .....

as my/our proxy to attend and vote (on a poll) for me/us and on my/our behalf at the 16th Annual General Meeting of the Company, to be held on Friday, 22nd day of September, 2017 at 12:30 p.m. at Bhasha Bhawan, National Library Auditorium, Near Alipore Zoo at Belvedere Road, Kolkata - 700 027 and at any adjournment thereof in respect of such resolutions as are indicated below:

## Resolutions :

1. To consider and adopt the Annual Audited Financial Statements of the Company for the financial year ended 31st March, 2017 and the Reports of the Board of Directors and Auditors thereon.
2. To appoint a Director in place of Mr. Varun Agrawal (DIN: 00441271), who retires by rotation at this Annual General Meeting and being eligible offers himself for re-appointment.
3. To ratify the appointment of statutory auditors and fix their remuneration.
4. To consider and approve increase in remuneration of Mr. Varun Agrawal (DIN: 00441271), Managing Director of the Company.
5. To consider and approve increase in remuneration of Mr. Vineet Agrawal (DIN: 00441223), Whole-time Director of the Company.
6. To ratify the remuneration of Cost Auditors.

Signed this ..... day of ..... 2017

Signature of Shareholder : ..... Signature of Proxy holder(s) : .....

Affix  
Revenue  
Stamp

**Note : This 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.**

1. A Proxy form which does not state the name of the Proxy shall not be considered valid.
2. Undated Proxy shall not be considered valid.
3. If the Company receives multiple Proxies for the same holdings of a Member, the Proxy which is dated last shall be considered valid; if they are not dated or bear the same date without specific mention of time, all such multiple Proxies shall be treated as invalid.
4. A Proxy later in date revokes any Proxy/Proxies dated prior to such Proxy.
5. A Proxy is valid until written notice of revocation has been received by the Company before the commencement of the Meeting.
6. When a Member appoints a Proxy and both the Member and Proxy attend the Meeting, the Proxy stands automatically revoked.