JAB TECHNOLOGIES LIMITED ABN 42 087 426 953

PO Box 728 Spring Hill, Queensland, 4004 Telephone: (07) 3367 8900 Fax: (07) 3833 3888

PROXY FORM

We
ıf
neing a shareholder/(s) of Jab Technologies Limited ("Company") and entitled to
shares in the Company hereby appoint
ıf
r failing him/her
ıf
or failing him/her the Chairman as my/our proxy to vote for me/us and on my/our behalf at the general neeting of the Company to be held at Level 3, 200 Creek Street, Brisbane, Queensland on 16 June 2006 at 10 am (Brisbane time) and at any adjournment.
nereof in respect of of my/our shares or, failing any number being pecified, ALL of my/our shares in the Company.
two proxies are appointed, the proportion of voting rights this proxy is authorised to exercise is []%. The Company on request will supply an additional proxy form.)
you wish to indicate how your proxy is to vote, please tick the appropriate places below.
f no directions are given, the Proxy may vote as the Proxy thinks fit or may abstain. By signing this appointment you acknowledge that the Proxy (whether voting in accordance with your directions or voting in their discretion under an undirected Proxy) may exercise your proxy even if he/she has an interest in the outcome of the resolution and even if votes cast by him/her other than as proxy holder will be disregarded because of that interest. However, if the Proxy you appoint is excluded from voting on a desolution and you do not direct the Proxy how to vote on that resolution, your vote will also be excluded.

RESOLUTION			For	AGAINST	ABSTAI
Authorise the issue of 8,000,000 shares and 8,000,000 free attaching options					
As witness my/our hand/s this	itness my/our hand/s this day of		20	006.	
If a natural person:					
SIGNED by)				
in the presence of:					
Witness					
Name (Printed)					
If a company:					
EXECUTED by)				
in accordance with its Constitution)))				
Director		Director/Secretary			
Name (Printed)		Name (Printed)			
under a dated and who declare not received any revocation	or and on behalf o by Power of Attorney es that he/she has n of such Power o n the presence of	/) /) s) f)			
Signature of Attorney		Signature of Witness			