

# FORM OF PROXY

I/We .....of  
..... being a  
member/s of John Keells Holdings PLC hereby appoint .....of  
..... or failing him/her

SUSANTHA CHAMINDA RATNAYAKE	of Colombo, or failing him
AJIT DAMON GUNewardENE	of Colombo, or failing him
GERARD SUMITHRA ABeyWARDENE GUNeSEKERA	of Colombo, or failing him
JAMES RONNIE FELITUS PEIRIS	of Colombo, or failing him
EMMANUEL FRANKLYN GAMINI AMERASINGHE	of Colombo, or failing him
TARUN DAS	of India, or failing him
STEVEN ENDERBY	of India, or failing him
PARAKRAMA DEVASIRI RODRIGO	of Colombo, or failing him
SITHIE SUBAHNIYA TIRUCHELVAM	of Colombo

as my/our proxy to represent me/us and vote on my/our behalf at the Thirtieth Annual General Meeting of the company to be held on 26 June 2009 at 10.00 a.m. and at any adjournment thereof, and at every poll which may be taken in consequence thereof.

Signed on this ..... day of ..... Two Thousand and Nine.

.....  
*Signature/s of shareholder/s*

**NOTE:**

INSTRUCTIONS AS TO COMPLETION OF FORM OF PROXY ARE NOTED ON THE REVERSE.

**INSTRUCTIONS AS TO COMPLETION OF FORM OF PROXY**

1. Please perfect the Form of Proxy by filling in legibly your full name and address, signing in the space provided and filling in the date of signature.
2. The completed Form of Proxy should be deposited at the Registered Office of the company at No. 130, Glennie Street, Colombo 2, not later than 48 hours before the time appointed for the holding of the meeting.
3. If the Form of Proxy is signed by an Attorney, the relevant Power of Attorney should accompany the completed Form of Proxy for registration, if such Power of Attorney has not already been registered with the company.
4. If the appointer is a company or corporation, the Form of Proxy should be executed under its common seal or by a duly authorised officer of the company or corporation in accordance with its Articles of Association or Constitution.
5. If this Form of Proxy is returned without any indication of how the person appointed as Proxy shall vote, then the Proxy shall exercise his/her discretion as to how he/she votes or, whether or not he/she abstains from voting.

Please fill in the following details:

Name : .....

Address : .....

.....

.....

Jointly with : .....

Share Folio No. : .....