

REQUEST FORM

KOYO INTERNATIONAL LIMITED

(Incorporated In the Republic of Singapore)

(Company Registration No. 200100075E)

09 April 2025

Dear Shareholder,

We are pleased to enclose printed copies of the Notice and Proxy Form for the upcoming Annual General Meeting of Koyo International Limited ("**Koyo**" or "**Company**") to be held physically at Lifelong Learning Institute, Room 07-01 (Lift Lobby A) at 11 Eunos Road 8, Singapore 408601 on Friday, 25 April 2025 at 3.00 p.m. (Singapore time).

In line with Koyo's sustainability efforts, the Annual Report for the financial year ended 31 December 2024 will be available for download from Koyo's corporate website at <https://koyotech.com/annual-reports/> and SGX website at <https://www.sgx.com/securities/annual-reports-related-documents> from the date of this letter.

If you wish to receive printed copies of the Annual Report, please complete the Request Form below and return it to Koyo no later than **16 April 2025**:-

- (a) By email to mail@koyointernational.com; or
- (b) By post to the registered office of the Company at 33 Ubi Avenue 3, #02-16 Singapore 408868.

By completing, and submitting the written request to us, you agree and acknowledge that we and/or our service provider may collect, use and disclose your personal data, as contained in your submitted Request Form or which is otherwise collected from you (or your agent or authorised representative(s)), for the purpose of processing and effecting your request.

Yours faithfully
For and on behalf of
Koyo International Limited

Cheek Hui Yee
Kong Wei Fung
Company Secretaries

ANNUAL REPORT REQUEST FORM

To: Koyo International Limited
33 Ubi Avenue 3, #02-16
Singapore 408868
Email: mail@koyointernational.com

Please send me a printed copy of the Annual Report for the financial year ended 31 December 2024.

Name of Shareholder : _____
NRIC/Passport No (last 4 character) : _____
Mailing address : _____
Number of shares held : _____

The manner in which you hold shares in the Company:

CDP Securities Account:

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CPFIS/SRS Account

Physical Scrip

Signature: _____ Date: _____

Note: Incomplete or improperly completed request forms will not be processed.