

SHIRLEY MARTIN SUPERANNUATION FUND

APPLICATION FOR MEMBERSHIP

To The Trustee
 SHIRLEY MARTIN SUPERANNUATION FUND

I, Shirley Martin, confirm that I am a director of the Trustee Company and apply to become a member of the SHIRLEY MARTIN SUPERANNUATION FUND, and submit the following details for the benefit of the Trustee:

Full Name: SHIRLEY MARTIN

Address: 1/2C Burnt Street
 SEAFORTH NSW 2092

Date of birth: 27 January 1953

Signed:



Shirley Martin

Dated: 11 May 2004