

1

Issuer (Shareholder)

First Name, Surname / Company name

Address

Date of birth, Registration no.

Securities account no.

Credit institution (securities account)

2

Revocation of Power of Attorney

General

I/We hereby revoke the power of attorney granted to the person named below to exercise the rights of the given Power of Attorney.

First Name, Surname / Company name

Address

Date of birth, Registration no.

On revocation to the proxy representative named by IMMOFINANZ AG

I/we hereby revoke power of attorney granted to Mr. Wilhelm Rasinger / Mr. Michael Knap (*please delete as applicable*), c/o IVA-Investors' Association, Feldmuehlgasse 22, 1130 Vienna, to exercise the rights of the given Power of Attorney together with any voting instructions with respect to the revoked power of attorney.

4

Date

Signature / company

Signatures of all co-shareholders, if applicable

Please complete and return until 4 October 2012

- by **post / messenger** to HV-Veranstaltungsservice GmbH (in fiduciary capacity), Waldgasse 9, 2443 Stotzing, Austria
- by **fax** to +43 (0)1 8900 500 89
- by **e-mail** to anmeldung.immofinanz@hauptversammlung.at (as scanned attachment; TIF, PDF, etc.)

Or present the revocation of a power of attorney on the day of the Shareholders' Meeting at the registration counter.