

Ongoing Disclosure Notice Disclosure of Directors and Officers Relevant Interests Section 19T(2), Securities Markets Act 1988

Se	ction 19T(2), Securities Markets Act 1988		
Α	Details of Director		
	Name of director or officer of public issuer:	Vivek Singh	
	Name of public issuer:	Pharmacybrands Limited	
	Name of related body corporate (if applicable):		
	Position held in public issuer	Chief Financial Officer	
В	Securities in public issuer of any related body corporate in w	hich directors or officer has	relevant interest
Number, class, and type of securities: 1 39,810 Ordinary shares			
C	Nature of relevant interest and name of registered holder		
	Nature of relevant interest in securities: 2	Beneficial	
	Name of registered holder of securities: 3	Vivek Singh	
D	Details of acquisitions and disposals		
	If the relevant interest was acquired		
	Date of acquisition: <u>4</u>	5/06/2013	
	Consideration haid for acquisition.	(in respect of ordinary shares)	
	Consideration paid for acquisition: <u>5</u>	\$23,000 to fully pay up 33,333	
		redeemable ordinary shares	
		prior to their conversion	
	If the relevant interest was disposed of	prior to their conversion	
		5/06/2013 (in respect of the	
		redeemable ordinary shares	
		which converted into ordinary	
	Date of disposal: <u>4</u>	shares)	
	Consideration paid for disposal: <u>5</u>	N/A	
		Conversion of redeemable	
	Type of transaction	ordinary shares	
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		33,333 redeemable ordinary	
		shares converted into 33,333	
		ordinary shares pursuant to	
	Describe the arrangement pursuant to which, or the circumstances		
	in which, the acquisition or disposal took place: <u>8</u>	Ownership Plan Deed	
E	Total number of transaction this notice relates to: 9	1	
F	Date of last disclosure notice (whether in form 1 or form 2)	24/04/2012 (in respect of	
	by the director or officer: 10	redeemable ordinary	
		shares)	
		21/12/2012 (in respect of	
		ordinary shares)	
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G	Signature		
		Siven Light	
	Signature of director or officer:		
	Date of signature	5-Jun-13	
	or		
	 		
	Cignature of person authorized to sign on babalf of diseases		
	Signature of person authorised to sign on behalf of director or officer:		
	Date of signature		
	Name and title of authorised person		