

POWER OF ATTORNEY FORM

Shareholder :

.....
(NAME AND SURNAME or BUSINESS NAME)

.....
(NUMBER AND SERIES OF PERSONAL IDENTITY CARD OF THE SHAREHOLDER or NATIONAL COURT REGISTER NO. / REGISTRY NO.)

.....
(NAME OF THE AUTHORITY ISSUING AN IDENTITY CARD or REGISTRATION AUTHORITY)

.....
(PERSONAL IDENTITY NUMBER PESEL / TAXPAYER'S IDENTITY NUMBER OF THE SHAREHOLDER)

Residence / seat's address and contact details of the Shareholder:

City/town, postal code:

Street and number:.....

E-mail address:.....

Phone No.:

hereby grants a power of attorney to:

Mr. / Ms.

(PLENIPOTENTIARY'S NAME AND SURNAME)

proving his/her identity with identity card

(IDENTITY CARD'S SERIES AND NUMBER)

issued by.....

(ISSUING AUTHORITY)

.....
(PLENIPOTENTIARY'S PERSONAL IDENTITY NUMBER PESEL)

Residence / seat's address and contact details of the Plenipotentiary

City/town, postal code:

Street and number:.....

E-mail address:.....

Phone No.:

to represent the Shareholder at the Annual General Shareholders' Meeting of STALPROFIL S.A. seated in Dąbrowa Górnica, convened to be held on June 12, 2013.

The plenipotentiary is authorized to

.....
(Signature of the shareholder/ persons representing the shareholder)