

Broad-BasedBlackEconomicEmpowermentCommission Compliance Report by Sphere of Government / Public Entities / Organs of State

(in terms of Section 13G (1) of the Act)

| Case Number | FORM: | BBBEE | 1 |
|-------------|-------|-------|---|
| | | | |

SECTION A: DETAILS OF ENTITY

| Name of Entity / Organisation | RCL FOODS LIMITED | | |
|-------------------------------------|---------------------------------------|--|--|
| Registration Number | 1966/004972/06 | | |
| Physical Address | 10 THE BOULEVARD, WESTWAY OFFICE PARK | | |
| | WESTVILLE, DURBAN | | |
| Telephone Number | 031 242 8600 | | |
| Email Address | Charmaine.boshoff@rclfoods.com | | |
| ndicate Type of Entity/Organisation | PUBLIC ENTITY | | |
| ndustry / Sector | AGRI-PROCESSING | | |
| Relevant Code of Good Practice | AGRI-BEE SECTOR CODES | | |
| Name of Verification Agency | GLP B-BBEE (PTY) LTD | | |
| lame of Technical Signatory | MURIEL ZACKEY | | |

| B-BBEE Elements | Target Score Including | Bonus Points | Actual Score Achieved | |
|-------------------------------------|---------------------------|------------------------------------|-----------------------|--|
| Ownership | 25 points | Nil | 17.82 | |
| Management Control | 19 points | Nil | 5.33 | |
| Skills Development | 20 points | 5 bonus | 12.55 | |
| Enterprise and Supplier Development | 40 points | 4 bonus | 31.42 | |
| Socio-Economic Development | 15 points | nil | 15.00 | |
| Total Score | 119 points | 9 | 82.12 | |
| Priority Elements Achieved | YES / NO and specify them | Yes | | |
| mpowering Supplier Status | YES / NO and specify them | Yes | | |
| -BBEE Status Level | | 4 | | |
| inal B-BBEE Status Level | 3 (YES F | 3 (YES Participation Recognition) | | |

SECTION C: FINANCIAL REPORT

| 1. | BAS | IC ACCOUNTINGDETAILS | : | | | |
|----|--|--|--------------------------------------|-----------|-----------------|--|
| | a. Accounting Officer's Name: | | ROB FIELD | | | |
| | b. Address: | | 10 THE BOULEVARD WESTWAY OFFICE PARK | | | |
| | | | | DURBAN | | |
| | c. Accounting Policy: (Your accounts are done?) | | Weekly | Monthly | Other (specify) | |
| | | | | X | 100 | |
| | d. | Has the attached StatementsandAnnualReport approved by the entity? | Financial been | 2 | YES | |
| 2. | PLEA | PLEASEATTACHTHEFOLLOWING: | | | | |
| | a. Copy of Annual Financial Statement including Balance Sheet and Income and Expenditure Report. | | | YES | | |
| | i) | Annual Report | | | YES | |
| | | | | | | |
| b. | Entit | y Annual Turnover: | R25,887,5 | 06,000-00 | | |
| | | | | | | |
| c. | Sigr | n-off and Date | | | | |
| | L | Signature | | , | | 9.7019 ate |
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