## For filings with the FSA include the annex For filings with issuer exclude the annex

## TR-1: Notifications of Major Interests in Shares

1. Identity of the issuer or the underlying issuer of existing shares to which voting the areattached:		Polo Resources Li	imited
2. Reason for notification (yes/no)			
An acquisition or disposal of voting rights			Yes (acquisition)
An acquisition or disposal of financial instrum acquisition of shares already issued to which			N/A
An event changing the breakdown of voting ri			N/A
Other (please specify):			N/A
3. Full name of person(s) subject to notification obligation:	Regei	nt Pacific Group Lim	nited
4. Full name of shareholder(s) (if different from 3):	Same	as above	
<b>5. Date of transaction</b> (and date on which the threshold is crossed or reached if different):	period April	oting rights were acquired during to eriod from 6 February 2009 to 30 april 2009, with the below threshold eing crossed on 30 April 2009	
6. Date on which issuer notified:	30 Ap	ril 2009	
7. Threshold(s) that is/are crossed or reached:	4%		

8: Notified A: Voting		ached to sl	nares				
Class/type of shares If possible	Situation p the trigger transaction	ing	Resulting situation after the triggering transaction				etion
use ISIN code Number of voting	of voting	Number of shares	Number of voting rights		Percentage of voting rights		
		rights		Direct	Indirect	Direct	Indirect
Ordinary	82,040,000	82,040,000	92,040,000	92,040,0	00 None	4.445%	None

Instruments			
ation after the trigger	ing transaction	9 (19 (19 (19 (19 (19 (19 (19 (19 (19 (1	
Expiration date	Exercise/ conversion period/date	No. of voting rights that may be acquired (if the instrument exercised/converted)	Percentage of voting rights
N/A	N/A	N/A	N/A
	Expiration date	Expiration date Exercise/ conversion period/date	Expiration date Exercise/ Conversion that may be acquired period/date (if the instrument exercised/converted)

Number of voting rights	Percentage of voting rights	
92,040,000	4.445%	

9. Chain of controlled undertakings through which the voting rights and /or the
financial instruments are effectively held, if applicable:

Proxy Voting:	
10. Name of proxy holder:	N/A
11. Number of voting rights proxy holder will cease to hold:	N/A
12. Date on which proxy holder will cease to hold voting rights:	N/A

13. Additional information:	N/A	
14 Contact name:	Jamie Gibson	
15. Contact telephone name:	+852 2514 6111	

For notes on how to complete form TR-1 please see the FSA website.