

THIS GENERAL POWER OF ATTORNEY

is given on the 24th day of May, 2006

by JOYCE CHAN

(Donor)
of 312 GREEN LANE, THORNHILL, ONT L3T 7A6 CANADA

I APPOINT WILLARD CHAN

(Attorney)
of the same address above

to be my Attorney in accordance with the Power of Attorney Act of Ontario, Canada and to do on my behalf anything that I can lawfully do.

This power of attorney is subject to the following conditions and restrictions:

NIL

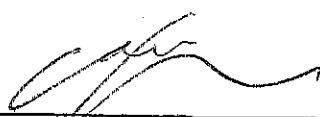
I agree for any heirs, executors, and administrators, to ratify and confirm all that such Attorney shall do or cause to be done by virtue of this Power of Attorney. This Power of Attorney shall remain in full force and effect until written notice of revocation has been given to the Attorney.

In accordance with the Substitute Decisions Act and the Powers of Attorney Act of Ontario, Canada, I declare that this Power of Attorney may be exercised during any subsequent legal incapacity on my part.

I further declare that, after due consideration, I am satisfied that the authority conferred on the Attorney named in this Power of Attorney is adequate to provide for the competent and effectual management of all matters in case I should become a patient in a psychiatric facility and be certified as not competent to manage such matters under the Mental Health Act. I therefore direct that in that event, the Attorney named in this Power of Attorney may retain this Power of Attorney for the management of all matters by complying with subsection 56(2) of the Mental Health Act and in that case the Public Trustee shall not become committee of my estate as would otherwise be the case under clauses 56(1) (a) and (b) of that Act.

If my spouse shall dispose of or encumber any interest in a matrimonial home in which I have a right to possession under Part II of the Family Law Act, I authorize the Attorney named in this Power of Attorney for me and in my name to consent to the transaction as provided for in sub-paragraph 21(1) (a) of the said Act.

WITNESSED BY:



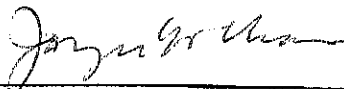
(Signature of Witness)

CARRIE CHAN

(Name of Witness)

(Signature of Witness)

(Name of Witness)



(Donor)