



FORM 10A

MATERIAL CHANGE REPORT

By gcharles at 9:51:22 am, 04/03/2026

Pursuant to Section 64 of the Securities Act, 2012

1. NAME OF REPORTING ISSUER

Name of Reporting Issuer

AGOSTINI LIMITED

2. DATE OF MATERIAL CHANGE

Date of material change

MARCH 03, 2026

3. DESCRIPTION OF MATERIAL CHANGE

Provide a description of the material change

THE BOARD OF DIRECTORS OF AGOSTINI LIMITED WISHES TO ADVISE THAT OUR SUBSIDIARY, ACADO LIMITED, HAS COMPLETED ITS ACQUISITION OF 100% OF THE ISSUED AND OUTSTANDING SHARES OF MASSY DISTRIBUTION (JAMAICA) LIMITED, A PHARMACEUTICAL AND CONSUMER PRODUCTS DISTRIBUTION COMPANY THAT OPERATES IN JAMAICA.

THE DIRECTORS BELIEVE THAT THIS STRATEGIC ACQUISITION WILL BENEFIT THE REGIONAL EXPANSION OF OUR GROUP'S CONSUMER PRODUCTS AND PHARMACEUTICAL BUSINESSES

4. DETAILS OF PUBLICATION OF MATERIAL CHANGE

	YES	NO
Will you be seeking an exemption from publishing a notice in accordance with Section 64(2) of the Securities Act 2012?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

If "No"

Date of Publication of Notice (dd/mmm/yyyy)	
--	--

If "Yes"

State the reasons for applying for the exemption


5. DETAILS OF SENIOR OFFICER

Name (First name, Last name)	NADIA JAMES - REYES TINEO
Position in Organization	CHIEF LEGAL AND COMPLIANCE OFFICER / COMPANY SECRETARY
Business Address	18 VICTORIA AVENUE, PORT OF SPAIN
Work Phone (1-xxx-xxx-xxxx)	1 868 623 4871
Fax Phone(1-xxx-xxx-xxxx)	
Email Address	Nadia.James-Reyestineo@agostinilimited.com

6. DATE, CERTIFICATION AND SIGNATURE

I hereby certify that the statement and information contained in this form and any attachment hereto are true and correct to the best of my knowledge and belief and submitted in compliance with the provisions of the Securities Act, 2012. I understand that any misrepresentation, falsification or material omission of information on this application may result in a breach of the Securities Act, 2012.

NADIA JAMES - REYES TINEO *Nadia Reyes Tineo* COMPANY SECRETARY MARCH 03, 2026

Print Name **Signature** **Position** **Date**

FOR OFFICIAL USE ONLY

Tool	ID Information
Registrant's Number	
Director's Number	
Document / Record Number	
Record's Management Date Received (dd/mm/yyyy)	

Approved By : _____ Date (DD/MM/YYYY) _____