

ASX Release
21 November 2025

ASX code: PIQ

2025 Annual General Meeting

Proteomics International Laboratories Ltd (Proteomics International; ASX: PIQ), a pioneer in precision diagnostics, is pleased to present the Chair's Address and Company Presentation to be presented at the Company's Annual General Meeting today.

Chair's Address

On behalf of the Board, I extend sincere thanks to Richard and the entire Proteomics team for their ongoing professionalism and dedication. I also wish to recognize the valuable contributions and support of my fellow Board members. Collectively, the efforts of our entire team hold great promise to fundamentally improve millions of lives. I likewise offer my gratitude to all our shareholders for their continued support.

Following the conclusion of the formal proceedings of today's meeting, Richard will provide an update on the Company's activities.

As announced in September, Richard has informed us of his intention to retire from his role as Managing Director early in 2026, marking the conclusion of 25 years since founding the Company. Consequently, this will be Richard's final AGM in the capacity of Managing Director.

Before proceeding with today's meeting, I would like to take this opportunity to formally acknowledge and thank Richard specifically for his vision and dedication in building Proteomics International into the outstanding company it is today and for the significant opportunities that lie ahead.

On a personal note, and on behalf of the Board, I thank Richard for the professional and thoughtful manner in which he has managed his planned retirement. This has provided a solid foundation for us to identify and appoint the best possible successor to lead the Company into the future.

By way of an update on this transition, I am pleased to confirm that the recruitment process is well advanced, and we look forward to providing further updates to the market in due course.

Authorised by the Board of Proteomics International Laboratories Ltd (ASX: PIQ).

FNDS

About Proteomics International Laboratories (PILL) (www.proteomicsinternational.com)

Proteomics International (Perth, Western Australia) is a wholly owned subsidiary and trading name of PILL (ASX: PIQ), a medical technology company at the forefront of precision diagnostics and bioanalytical services. The Company specialises in the area of proteomics – the industrial scale study of the structure and function of proteins. Proteomics International's mission is to improve the quality of lives by the creation and application of innovative tools that enable the improved treatment of disease.

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Forward Looking Statements

This Presentation is provided by Proteomics International Laboratories Ltd (Proteomics International, Proteomics, the Company, ASX: PIQ).

You should not rely upon anything in this presentation and/or any information obtained from the Company, its Directors or their associates in deciding whether or not to seek to purchase the shares of the Company. This is not an offer to subscribe for securities in the Company.

The Presentation may contain quantitative statements of anticipated future performance such as projections, forecasts, calculations, forward-looking statements or estimates all of which are based on certain assumptions (Forward Looking Statements). The Forward Looking Statements may involve subjective judgements and are based on a large number of assumptions and are subject to significant uncertainties and contingencies, many of which are outside the control of the Company and may not prove to be correct.

No representation or warranty is made that any Forward Looking Statements will be achieved, or occur, or that the assumptions upon which they are based are reasonable or the calculations from which they have been derived are correct. Actual future events may vary significantly from the Forward Looking Statements. Each Recipient should undertake their own independent review of the Forward Looking Statements, including the assumptions on which they are based and the financial calculations from which they are derived.

Material Business Risks. The Company has identified specific risks that could impact upon its future prospects. These risks are listed in the PIQ 2025 Annual Report.



Proteomics International Key Highlights



Launching four first-in-class diagnostics in 2025

Promarker Promarker So Promarker Endo Oxi Dx



Large addressable markets with significant unmet medical needs



Tests validated in large clinical studies

Significant advantages over current
Standards-of-Care



Consumer driven strategy

- Targeting Primary Care & GP Clinics
- Patient digital platform built
- Proven demand with KOLs on board



Products developed

Patented

Highly attractive margins



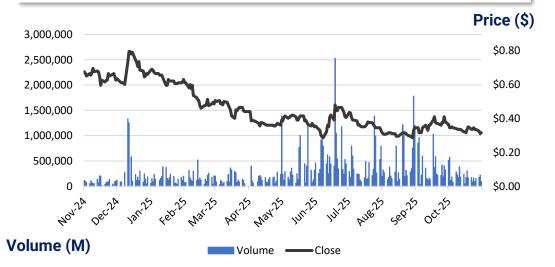
Funded to execute launch strategies

Strategically positioned to secure Licencing
Agreements



Corporate Overview

Corporate Snapshot	
ASX code	PIQ
Market Capitalisation (19 Nov 2025)	A\$52m
Cash (30 Sep 2025) + (R&D Tax Incentive \$2m & Grant \$0.5m H1 FY26)	A\$12.7m
Share Price (19 Nov 2025)	A\$0.32
Shares on issue (19 Nov 2025)	163.7m
Quarterly Cash Receipts – Q1 FY26	A\$1.8m
Quarterly Cash Burn – Q1 FY26	A\$1m



Financial and Corporate

Strong Capital position

- \$12M capital raise completed May 2025 comprising \$4.5M Institutional & Director placement + \$7.5M oversubscribed SPP
- Funded to execute launch strategies

Revenue generating

- Bioanalytical service business helps offset cash burn
- Launching four key tests in 2025:
 - PromarkerD
 - PromarkerEso
 - PromarkerEndo
 - OxiDx

State-of-the-art laboratories

- Specialist proteomics technology platform
- Cutting edge facility with world leading accreditations
- US clinical reference laboratory established (CLIA certified)
- Headquartered on QEII Medical Campus, Perth, WA

Top 40 Shareholders hold 41%

Directors are highly aligned with shareholders holding 11%



Problem & Solution: a suite of novel diagnostic tests

Targeting major diseases which are currently detected late → existing outcomes are poor for patients & cost healthcare system billions of dollars



Diabetic Kidney Disease

COMMERCIALISATION

- A novel and accurate blood test for predicting the onset of chronic kidney disease in type 2 and type 1 diabetes (DKD)
- Currently 1 in 2 people with diabetes will develop DKD
- DKD leads to dialysis/kidney transplant; US reimbursement price pending
- Ramp-up phase following launch in Australia and USA in Q2 and Q3 CY25



COMMERCIALISATION

- First-in-class blood test identifies all stages of endometriosis with high accuracy
- Current diagnosis takes average 7 yrs and requires invasive laparoscopy
- Launch in Australia pending; USA to follow



Esophageal Cancer

COMMERCIALISATION

- A novel and accurate blood test to diagnose esophageal cancer
- Commonly caused by chronic acid reflux (or 'GERD')
- Current diagnosis requires endoscopy + biopsy
- Ramp-up phase following launch in Australia in Q3 CY25; USA pending



Oxidative Stress

COMMERCIALISATION

- Unique test precisely identifies muscle damage & assesses training recovery
- In professional sports muscle damage accounts for 55% of injuries, while 85% of racehorses get injured during their 2- & 3- year-old racing seasons
- Launch in Australia pending; USA to follow

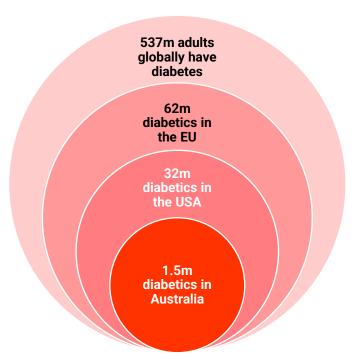


Market Opportunity

Large addressable unmet needs globally - targeting the US and Australian markets initially

Promarker D

10.5% of the global adult population have diabetes

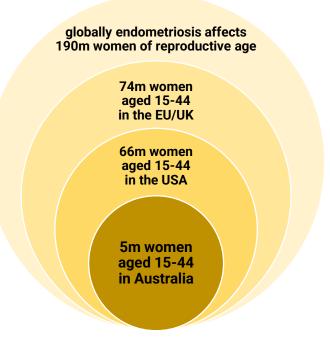


Target market = 33.5 million adults

Sources: International Diabetes Federation (IDF) Atlas 10th Edition 2021

Promarker <u>Endo</u>

1 in 9 women have endometriosis

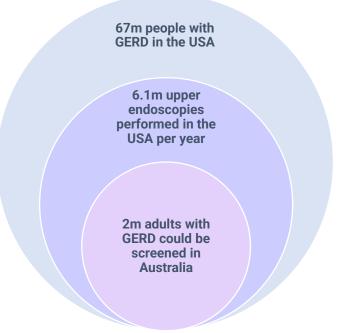


Target market = 71 million women

World Health Organisation (WHO.org); www.who.int/news-room/fact-sheets/detail/endometriosis European Commission (StatisticsTimes)(ONS.gov) www.marchofdimes.org/peristats

Promarker **Eso**

10-20% western populations have Gastroesophageal reflux disease (GERD)



Target market = 69 million people

Gastroenterology (2022): doi: 10.1053/j.gastro.2022.03.037
Gastroenterology (2018): doi: 10.1053/j.gastro.2018.08.063
www.yalemedicine.org/conditions/gerd-gastroesophageal-reflux-disease
www.racgp.org.au/afp/2015/october/gastro-oesophageal-reflux-disease-gord-in-australia

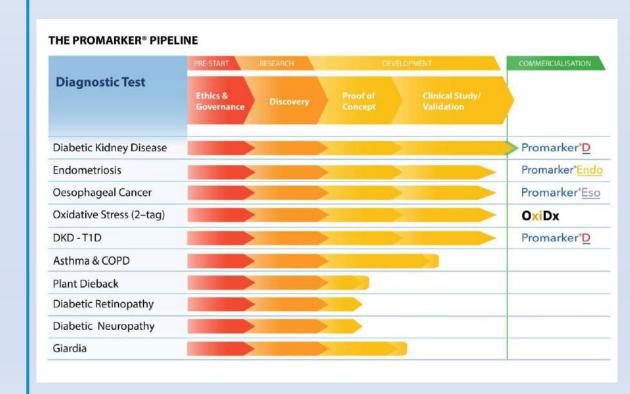


Disruptive Platform Technology

Promarker® platform technology drives a deep pipeline of novel precision diagnostic tests

Global potential in major markets

- Promarker® engine develops novel intellectual property
- Targeting new diagnostic tests in areas of significant unmet need
- Uses proteomics the industrial scale measurement of proteins in a biological system
- Detects unique protein biomarker profiles or molecular "fingerprints" in a sample from any tissue
- Biomarkers integrated into a cloud based diagnostic algorithm to detect disease
- Biomarkers can be measured on next generation diagnostics technology platforms or re-engineered onto traditional platforms for standard pathology use
- Specialist certified laboratories already established in Australia and USA





Product Development, Regulatory & Reimbursement

Product rollouts at an advanced stage with well defined path forward

Product status	Next-generation PromarkerD immunoassay in clinic with comprehensive patent protection PromarkerEso mass spectrometry assay validated in three independent cohorts - nearing clinic with patent protection PromarkerEndo mass spectrometry assay validated in 700+ patient study - nearing clinic with first patent granted OxiDx dried blood spot test – multiple peer-reviewed publications - nearing commercial use with patent protection
Regulatory path	Running as a Laboratory Developed Test (LDT) in USA and to ISO 15189 (clinical) Laboratory Standard in Australia Australia – PI laboratory certified to ISO 15189, ISO 17025 & ISO 13485 USA – PI USA Clinical Laboratory Improvement Amendment (CLIA) certified Reference Laboratory in Irvine, California established to provide all Promarker® tests FDA Breakthrough path identified as an additional route to market for PromarkerEso and PromarkerEndo
Logistics	All Promarker tests to use the same digital platforms and network of blood collection sites Partnership with Healius Group to access blood collection sites across Australia Multiple blood collection sites contracted in California with network expanding; other states to follow
Reimbursement	CPT PLA reimbursement code (0579U) granted by American Medical Association (AMA) for next-gen PromarkerD test - pricing announcement due November and effective 1 January 2026 Version 1 of PromarkerD test (0385U) secured pricing with the Centers for Medicare and Medicaid Services (CMS) of \$391 Insurers have started reimbursing against code 0385U

Other Promarker tests are following the same roll-out path as PromarkerD



Business Model: utility of the Promarker tests

Significant advantages over Standard-of-Care with the ability to drive clinical outcomes





Promarker <u>Eso</u>

Standard-of-Care (SoC)	Biochemical blood or urine test Cost USD \$34 - \$59	Laparoscopy Cost (average) USD \$4,923	Endoscopy Cost (average) USD \$2,750
Limitations of SoC	Does not predict DKDConfirms after symptoms are present	Invasive procedureDifficult to diagnose even with surgery	 Frequently missed until cancer is late stage Invasive procedure
Benefits of PIQ Test	 Predicts DKD onset up to 4 yrs in advance Enables intervention to slow/stop onset of disease 	Simple to performNon-surgical	Simple to performNon-surgical
Accuracy	Sensitivity 87%, Specificity 83% AUC: 0.88	Sensitivity up to 96%, Specificity up to 98% AUC: >0.85	Sensitivity 93%, Specificity 97% AUC: 0.93

Current 5 yr survival rate is <20% but readily treated if detected early

Sources:

US pricing: requestatest.com PIQ publication – Diagnostics (2025): doi.org/10.3390/diagnostics15060662

Kidney damage is irreversible

- improved quality of life

potential to avoid dialysis/ kidney transplant

US pricing: endometriosis.net/clinical/cost-laparoscopy-surgery PIQ publication - Human Reproduction (2024): doi.org/10.1093/humrep/deae278

Current average 7 yrs for diagnosis

Improved treatment options if detected early

Endometriosis can cause infertility

www.newchoicehealth.com/endoscopy; doi:10.1001/jamanetworkopen.2021.27784 PIQ presentation - World Congress Esophageal Diseases, 2024 www.cancer.org/cancer/types/esophagus-cancer

Benefit of early

intervention



Test Economics – Australia and United States

Highly attractive margins and first test now live in Australia and USA

United States	Promarker D	Promarker <u>Endo</u>	Promarker <u>Eso</u>	
Target Launch Date	20-Jun-2025	Q4 CY25	Q3 CY25	
Initial Capacity	84,000 p.a.	32,000 p.a.	32,000 p.a.	
Market Size (addressable patients)	32 million	66 million	67 million	
Pricing	US\$391	Est. US\$1,000 - US\$1,500	Est. US\$990	
Gross Margins	>70%	>70%	>70%	
Payment Models	Cash Pay (Centres for Medicare Services (CMS) PLA^ reimbursement code 0579U granted)	Cash Pay (will seek PLA code and insurance reimbursement; outcome est. Q2 CY26)	Cash Pay (will seek PLA code and insurance reimbursement; outcome est. Q2 CY26)	
Australia				
Target Launch Date	13-Mar-2025	H2 CY25	Q3 CY25	
Initial Capacity	84,000 p.a.	32,000 p.a.	32,000 p.a.	
Market Size (addressable patients)	1.5 million	5.0 million	2.0 million	
Pricing	A\$245	Est. A\$1,000 - A\$1,200	A\$940	
Gross Margins	>70%	>70%	>70%	
Payment Models	Cash Pay (will seek insurance reimbursement and PBS listing; outcomes CY26)	Cash Pay (will seek insurance reimbursement and PBS listing; outcomes CY26)	Cash Pay (will seek insurance reimbursement and PBS listing; outcomes CY26)	

Sources:

International Diabetes Federation (IDF) Atlas 10th Edition 2021 Centers for Medicare & Medicaid Services

World Health Organisation: endometriosis

www.yalemedicine.org/conditions/gerd-gastroesophageal-reflux-disease www.racgp.org.au/afp/2015/october/gastro-oesophageal-reflux-disease-gord-in-australia



Go-to-Market Strategy

Clinician driven strategy supported by an on-line patient awareness campaign



- Targeted and research driven awareness program
- Integrated into Bp Premier Best Practice software (Aus)
- Drive adoption of tests through GP & PCP clinics
- 96% of US physicians indicated they would likely use PromarkerD to inform clinical decision-making^



Increase Awareness & Availability of Promarker® Tests



Online awareness Campaign

In the United States PIQ can market directly to patients, which is not possible in Australia where indirect marketing is required

- Online awareness program for consumers
- myTEST.Health web portal for patients
- Outlines benefits of early intervention
- Allows patients to request test themselves
- Over 2,100 blood collection sites available (Aus)
- Helps patients take control of their health





Market Launch: Ramp Up → Partnering

Drive near-term revenue with maximum <u>optionality</u> for strategic partnering

Focus on market awareness and launch of tests



Demonstrate market adoption and sales



Grow sales via strategic partnerships

- Developed suite of highly accurate, tests for large unmet medical needs
- Platform, analytical infrastructure
 & digital sales pathway built
- Enables tech transfers of each clinical test to future partners
- Provides fastest pathway to achieving product launch and revenues
- Reimbursement pricing (USA)
 imminent for PromarkerD other
 tests to follow

- Engagement with GP clinics, KOLs & end users to refine sales practices
- Grow market awareness via traditional and digital avenues
- Increase market up-take as market awareness improves
- Attractive pre-built platform for any potential licensing partner:
 - Global virtual health and diagnostic companies
- Leverage more attractive terms for out-licensing as tests are in market

- Industry and Governments are focusing on Personalised/Precision medicine
- Healthcare and diagnostic companies actively seeking new diagnostic tests
- Ongoing dialogue with prospective strategic partners
- Company will retain optionality for its tests:
 - Drive revenue through the platform,
 - Non-exclusive licensing agreements
 & retain use of platform, and
 - Provide exclusive rights to licensing partners

A NOVEL BLOOD TEST FOR THE EARLY DETECTION OF ESOPHAGEAL CANCER

Promarker Eso powered by Proteomics International





PromarkerEso: Esophageal Cancer

Clinical question – can a blood test distinguish between individuals who are:

- 1) healthy
- 2) esophageal adenocarcinoma (EAC) patients
 - ▶ 66% of EAC patients report chronic acid reflux (GERD)
 - but 90% of EAC cases continue to remain undetected
 - and 25% of EAC cases are misdiagnosed as negative by endoscopy

Test status

- Launched in Australia in Q3 CY25 under ISO 15189
- **Test shows 94% accuracy** in diagnosing patients with and without the disease (World Congress Esophageal Diseases, 2024 and *Proteomes*, 2025)
- Test shows 81% sensitivity in diagnosing stage I EAC, raising to 91% for stage II
 and 100% for stage III/IV (World Congress Esophageal Diseases, 2025)
- Patents granted in Europe, China, Australia; USA pending
- Preparing to launch PromarkerEso in USA in CLIA Reference Lab and apply for a new PLA reimbursement code in Q1 CY26

A non-invasive blood test for esophageal cancer aims to transform the way this disease is detected and is attracting interest from world leaders in EAC treatment

First-in-class blood test PromarkerEso in commercialisation phase

Clinical studies

- Development and Validation Collaboration with QIMR Berghofer Medical Research Institute analysed 302 samples across two patient cohorts: (World Congress Esophageal Diseases, 2023)
 - □ PROBE-NET study, Australia (N=249)
 - Ochsner Health System, USA (N=49)
- Clinical validation biomarker panel confirmed in independent patient cohort from Victoria Cancer Biobank (N=165)

(Lorne Proteomics Symposium, Feb '24)

Clinical validation – analysis of samples from Victoria Cancer Biobank confirmed clinical performance of the test (N=165)
(World Congress Esophageal Diseases, 2024)



PromarkerEso: Esophageal Cancer

First-in-class blood test PromarkerEso in commercialisation phase

The latest clinical validation results for PromarkerEso were published in the peer-reviewed journal *Proteomes* in June. The study involved 259 serum samples across three independent patient cohorts from Australia and the USA

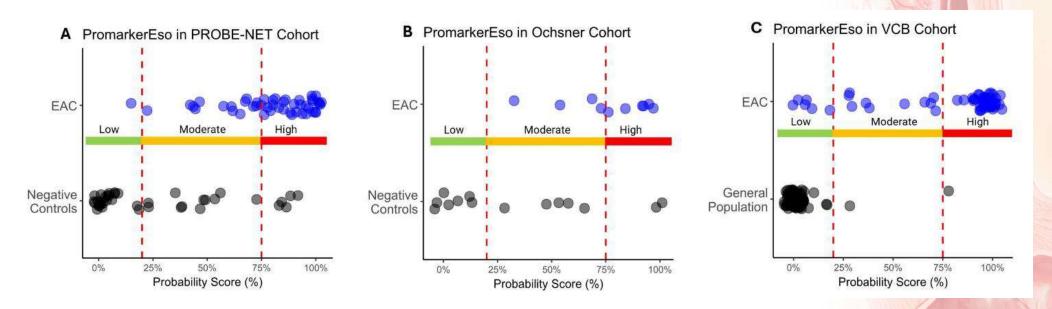


Figure: PromarkerEso distribution of esophageal adenocarcinoma (EAC) and control sample probability scores.

Results are classified into Low-, Moderate- and High-Risk categories: (A) development cohort (PROBE-NET), (B) initial validation cohort 1 (Ochsner), (C) primary validation cohort 2 (VCB). Actual outcomes are represented as blue dots (EAC) and black dots (Negative Controls or General Population). Lower and upper cutoffs (20% and 75% respectively) are represented by the red dotted lines.



PromarkerEso: What are our Key Opinion Leaders saying?

My impression on Promarker®Eso market release

Professor Robert Odze, MD, FRCPc Senior Consultant Pathologist, Professor of Pathology Tufts University Medical School, USA



"As a pathologist, I am keenly aware of the multitude of problems and limitations we have regarding detection of esophageal cancer and its precursors based on tissue analysis.

Proteomic biomarker serum analysis represents a new approach that would greatly reduce the current problems we face in cancer detection and enable better early and more accurate risk prediction.

Incorporating serum-based biomarkers that can be used in the general population will enhance our ability to detect cancer and save lives, both of which are in great need for patients at risk for esophageal cancer"

"The early, prompt detection and precise risk assessment of esophageal adenocarcinoma will enable curative treatment for this disease.

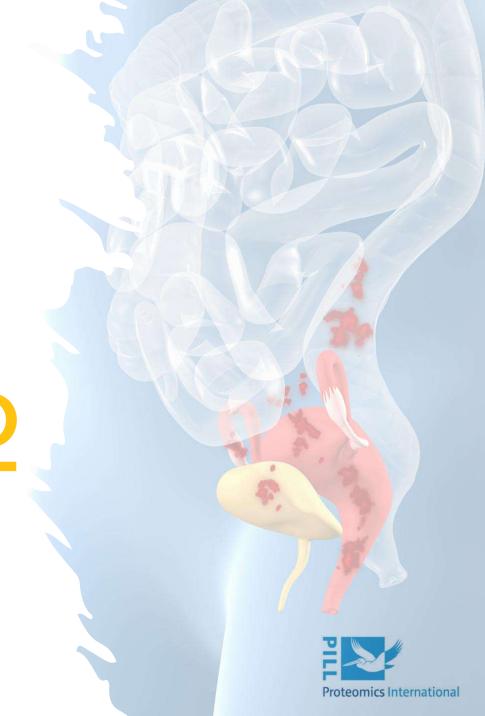
Advanced diagnostics, in particular PromarkerEso, are proving to be an important and effective way to transform the outcomes for our patients"



Professor Hugh Barr, MD (Dist), ChM, FRCS, FRCSE, FHEA, FOD Consultant General & Gastrointestinal Surgeon Gloucestershire Hospitals NHS Foundation Trust, UK

A NOVEL BLOOD TEST FOR THE EARLY DETECTION OF ENDOMETRIOSIS

Promarker Endo powered by Proteomics International





PromarkerEndo: Endometriosis

First-in-class blood test Promarker Endo commercialisation ready

Clinical question – can a blood test distinguish between individuals who are:

- 1) healthy
- 2) symptomatic patients (pelvic pain but surgically-diagnosed absence of endometriosis)
- 3) endometriosis patients (confirmed by laparoscopy 4 stages: minimal/mild/moderate/severe)

Test status

- PromarkerEndo diagnostic test demonstrates high accuracy across all stages of endometriosis (World Endometriosis Conference, 2025)
- Excellent diagnostic performance published for prototype PromarkerEndo test in identifying all stages of endometriosis with high accuracy (Human Reproduction 2024)
 - endo vs healthy controls: Sensitivity 96%, Specificity 98%
 - stage IV endo vs symptomatic controls: Sensitivity 98%, Specificity 96%
 - stage I endo vs symptomatic controls: Sensitivity 87%, Specificity 72%
- Methodology (mass spectrometry) adapted for clinical launch
- Patents pending in all major jurisdictions; first patent granted in Japan
- Proteomics International preparing to launch PromarkerEndo in Australia under ISO 15189 framework, with USA to follow

A non-invasive blood test for endometriosis is a potential 'game-changer' in women's health and the published results have attracted interest worldwide

Clinical studies

- Development biomarker panel (Wesley Medical Research Biobank N=56 samples)
- Validation Collaboration with Royal
 Women's Hospital & University of Melbourne
 analysed (endometriosis N=464; healthy
 individuals N=153; symptomatic controls
 N=132) (World Endometriosis Conference, 2023 & 2025)
- Confirmation results Peer reviewed and published (Journal Human Reproduction, Dec 24)
- Further studies Collaboration ongoing with University of Oxford for international validation study (N=600 samples)



PromarkerEndo: Endometriosis

First-in-class blood test Promarker Endo commercialisation ready

The latest clinical validation results for PromarkerEndo were presented at the 16th World Congress on Endometriosis in May.

The study involved over 700 samples.

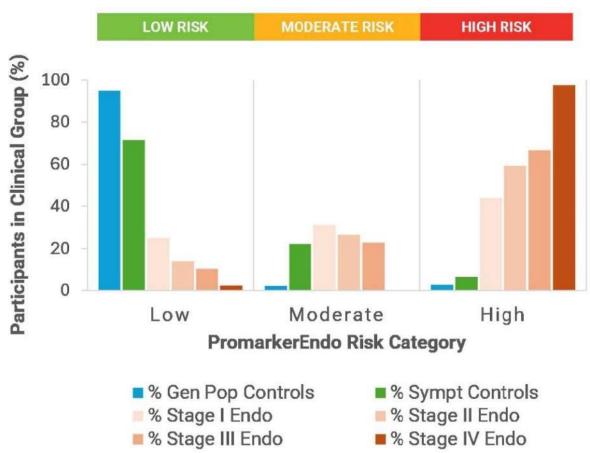


Figure: PromarkerEndo distribution of endometriosis stages and control sample probability scores

Results are classified into Low-, Moderate- and High-Risk categories: Endometriosis Stage I (N=228), Stage II (N-64), Stage III (n=57), Stage IV (N=87), General population controls (N=142), Symptomatic controls (N=126). Actual patient outcomes are shown in colored bars as categorised by PromarkerEndo, for example, the majority of symptomatic controls (green bars) were categorised as low risk, however, some individuals are categorized moderate and high-risk of having endometriosis.

Milestones: multiple value drivers achieved & ahead



Milestone TARGET QT	R FY25	Q1 FY26	Q2 FY26	Q3 FY26	Q4 FY26	Impact
Commercial						
Australian lab certified for clinical testing						Basis for all Promarker tests to be run clinically
US Reference Lab established	√					Key to first US sales and reimbursement
PromarkerD launched in W. Australia	√					Pilot launch to optimise logistics & digital framework
PromarkerD launched across Australia		√				Enable clinical testing in Australia and tech transfer overseas
PromarkerD launched in USA	√					Initiate pathway to commercial sales and partnering
PromarkerEso launched in Aus/USA		√				Initiate pathway to commercial sales and partnering
PromarkerEndo launched in Aus/USA						Initiate pathway to commercial sales and partnering
Material sales of PromarkerD						Drive future revenue
Promarker tests licensing deals						Drive regional uptake and future revenue
Clinical/Technical	Clinical/Technical					
Promarker tests validation studies	√					New first-in-class diagnostic tests
Promarker diagnostics pipeline updates						New diagnostic tests in development
Reimbursement						
PromarkerD reimbursement code grante	d 🗸					Support US roll-out
PromarkerD PLA code pricing set						Broaden usage of test in USA
PromarkerEso PLA code application						Support US roll-out



Team: Board of Directors

Highly experienced team with proven track record of delivering value for shareholders



Dr James Williams PhD (Melbourne), MBA (UWA), BSc, Hons (Aberdeen), GAICD, Non-Executive Chair

Experienced biotech leader and investor with roles spanning CEO, CTO, Director and Chair across multiple life-science companies (including Dimerix and iCeutica), contributing to five FDA-approved drugs, devices and diagnostics.



Dr Richard Lipscombe PhD (London), MA (Oxon), Co-Founder & Managing Director

Led the Company from foundation through listing in 2015 to today. Thirty years biotechnology experience in R&D and product commercialisation in commercial and academic entities. Technical expertise in chemistry, immunology, biomarker discovery & clinical proteomics.



Paul House GAICD, BCommerce (UWA), Non-Executive Director

Over 25 years with multi-national corporations, CEO of Imdex (ASX:IMD), prior role as MD of SGS India for 8 years. Previously held CFO and COO roles and was Senior Manager at a leading global management consultancy firm.



Neville Gardiner BBus (Accounting and Business Law) (Curtin), Non-Executive Director

Seasoned finance professional with over 30 years' experience providing corporate advice to Boards of public and private companies. He was Co-Founder and MD of Torridon Partners, an independent corporate advisory firm, which was acquired by Deloitte in 2016, where he became Partner in their M&A Advisory team.



Aaron Brinkworth GAICD, BHlthSc (ECU), Non-Executive Director

Over a 22-year career at Gilead Sciences (Nasdaq: GILD), Mr Brinkworth held senior roles across commercial, patient access and strategic licensing. He led Gilead's Asia Pacific operations, overseeing sales, marketing and distribution across the region. Mr Brinkworth is currently a Non-Executive Director at Resonance Health (ASX: RHT).



Vicki Robinson LLB (Hons), BCom, Non-Executive Director

Over 20 years' experience in senior executive, legal, transactional and commercial management roles at Wesfarmers Limited, serving on the Wesfarmers Leadership Team and as Company Secretary for Wesfarmers and its subsidiaries. She holds Bachelor degrees in Laws (Honours) and Commerce and has extensive non-executive director experience across multiple industries.



Commercialisation Team



PHILIPS
Cochlear QIAGEN

Medtronic



Promarker D

Phillip Prather Chief Commercial Officer

Phillip brings extensive leadership in the global medical devices industry, particularly in developing new markets and successfully launching products for innovative companies including Cochlear, QIAGEN, Philips, Medtronic, and Leo Cancer Care. His experience includes regulatory, quality, and market access across major medtech markets (EU, North America, APAC). Philip is responsible for global sales, marketing, and customer engagement activities.



Pearl is responsible for the commercial delivery of the Promarker® pipeline. Since joining Proteomics International in 2014, Pearl has successfully led the manufacturing of the PromarkerD test, regulatory & PLA code submissions, and most recently the establishment of the Company's CLIA certified lab in the USA.

Dedicated industry focused team driving commercial adoption







I:I western
diagnostic pathology

Jacqueline Gray
Chief Financial Officer & Head of Corporate Development

Jacqueline has held senior leadership roles with global media and healthcare companies, including the Economist, BBC Worldwide, and National Medical Enterprises. More recently her focus has been with high growth, emerging businesses in medical technology, Software as a Service (SaaS), digital marketing and ecommerce. Jacqueline has experience in M&A, business restructuring, and managing businesses during disruption, downturn, and exponential growth.

Dr Johan Conradie Clinical Pathologist

Johan is a Chemical Pathologist with over 21 years of experience in clinical biochemistry and toxicology, and gained his FRCPA in 2008 and later completed an MBA at the University of Western Australia in 2019. Johan also serves as the Medical Director of Western Diagnostic Pathology. Johan has overall responsibility for clinical results from the suite of Promarker® diagnostic tests.



Investment Summary



- Commercialising x4 first-in-class blood tests for major diseases and conditions with significant unmet need
- Ramp-up phase for PromarkerD & PromarkerEso with first sales already achieved
- Commercial platform developed to drive awareness for each test in Australia and USA to attract strategic partners
- Proprietary platform technology provides engine to develop further tests
- Funding, team, infrastructure and certifications in place
- Catalyst rich FY 2026



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Supplemental – the Promarker® suite of clinical diagnostic tests



Accreditations

The PILL Group holds one of the highest levels of accreditation of any medical technology organisation globally

Cutting edge laboratories with world leading accreditation:

Australia

- ISO 15189: Clinical testing
- > ISO 13485: Medical devices Quality management systems (manufacturing)
- > ISO 17025: Chemical Testing (analytical/R&D)

International Organisation for Standardization (ISO) accreditations are globally recognise and demonstrate Proteomics International's ability to consistently achieve technically valid, traceable and reproducible results

- In 2009 Proteomics International became the first laboratory in the world to receive ISO 17025 accreditation for proteomics services (Accreditation number: 16838)
- In 2021 Proteomics International received ISO 13485 certification for the design and development of PromarkerD (Certification number: MD734669)
- In September 2025 Proteomics International was ISO 15189 certified by the National Association of Testing Authorities (NATA) and the Royal College of Pathologists of Australasia (RCPA) (Certification number: 21667)

USA

- Clinical Laboratory Improvement Amendment (CLIA) certified
- California State licence

CLIA-designated laboratories are authorised to offer clinical testing in the USA[^], particularly laboratory developed tests (LDTs)

In 2025 Proteomics International USA received CLIA certification (ID number: 05D2317422)



A FIELD READY BLOOD TEST FOR THE PRECISE MEASUREMENT OF

OXIDATIVE STRESS





OxiDx: Oxidative Stress

What is Oxidative Stress?

- Oxidative stress occurs when the body's antioxidant defences are overwhelmed by an excess of toxic oxidants
- Oxidative stress is implicated in over 70
 health conditions with levels often reflective of
 a person's health condition

OxiDx - blood test to monitor oxidative stress

 OxiDx P/L was spun out of PIQ and the University of Western Australia in Aug 2022

World first test:

- Accurate highly sensitive
- Simple to use finger prick sample
- Cost effective for mass market use
- Peer reviewed multiple journal publications
- Patented patent families cover Australia & USA, Europe & Japan; others pending

Groundbreaking blood test nearing commercialisation









World first results published:

- Athletic monitoring tool for competition preparedness:
 - Professional Sports performance, recovery and injury risk management 55% of sports injuries are muscle related
 - OxiDx test can identify muscle damage and assess recovery in elite athletes (Physiological Reports, Dec 2024)
 - Thoroughbred Racing Industry injury risk management and race-preparedness
 85% of Thoroughbreds suffer injury in their first 2-3 yrs
 - OxiDx test can identify muscle damage and assess recovery in thoroughbred racehorses (Veterinary Science and Medicine, July 2025)

Targeting commercial use of OxiDx technology:

- Potential spin-out or partnering opportunity across sports & horse racing industries
- Preparing to launch OxiDx in Australia





OxiDx: Oxidative Stress

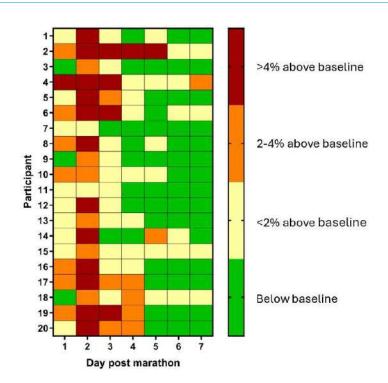


Figure: Heatmap depicting oxidative stress levels in elite marathon runners.

Colours depict thiol-oxidised albumin levels that are below or above the baseline value for 20 athletes each day after completing the marathon.

Proof of concept studies completed in high performance athletes and thoroughbred horses

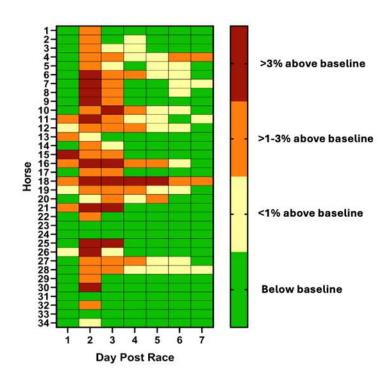


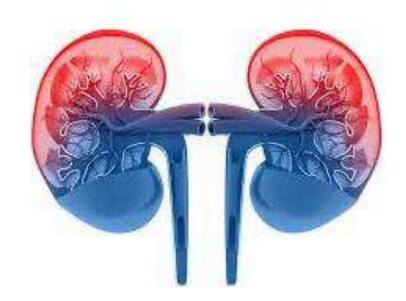
Figure: Heatmap depicting oxidative stress levels in thoroughbred race horses.

Colours depict thiol-oxidised albumin levels that are below or above the baseline value for 34 horses each day after completing the race.

Promarker D

PROACTIVELY CHANGING RENAL HEALTHCARE

A simple blood test for predicting diabetic kidney disease





Problem and Solution – Diabetic Kidney Disease

The Problem

- 537 million adults with diabetes globally
- 1-in-3 with diabetes have chronic kidney disease
- Kidney disease is a silent killer kidney function can fall below 15-20% with no symptoms
- Damage to kidneys is irreversible, therefore early detection is paramount
- Diabetic kidney disease leads to renal failure which requires dialysis (US\$72,000 p.a.) or kidney transplant
- Total cost of diabetic kidney disease = U\$\$130 Bn per year in USA alone



Solution

Current standard-of-care diagnostics

- Existing tests (known as eGFR and ACR) can only detect chronic kidney disease once it is already present
- Current standard-of-care tests cannot predict the onset of diabetic kidney disease
- If unchecked, patients ultimately require dialysis and/or a kidney transplant



Diseased Kidney

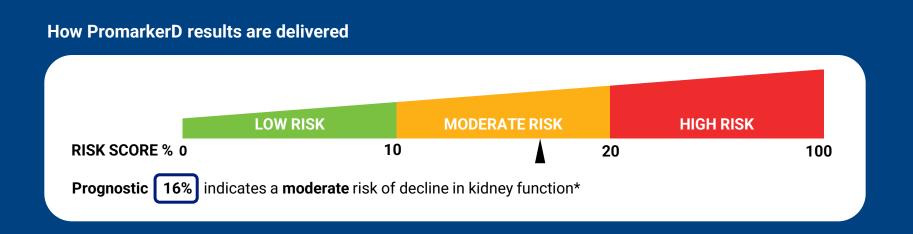
Promarker D

- PromarkerD can predict the onset of disease before clinical symptoms appear (up to four years prior)
- Doctors can then prescribe an early therapeutic treatment to slow or stop the onset of disease
- Kidneys remain healthier for longer, saving healthcare systems billions of dollars and improving quality of life for patients



PromarkerD - Results & Intervention





Risk Score	Intervention	Testing Regimen
Low Risk	Standard diabetes management	Test Annually
Moderate Risk	 More frequent monitoring Optimisation of lifestyle Review of glycemic targets and management Review non-glycemic risk factors Avoidance of potentially nephrotoxic drugs 	Test every 6 months
High Risk	 Very close monitoring Intensive management strategies based on those for 'Moderate risk' above Utilisation of therapeutic drugs 	Test every 3 months

^{*}as defined by incident diabetic kidney disease (eGFR <60ml/min/1.73m²) in the next four years. Note: if eGFR level at the time of the test is already <60ml/min/1.73m², then the risk of a further decline in kidney function is defined as an eGFR decline >30% in the next four years

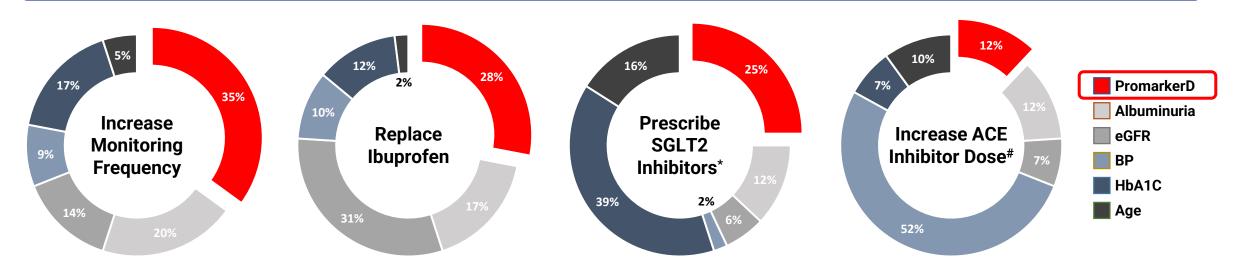


PromarkerD: Launch strategy supported by engagement with Clinical Utility & Decision Impact

KOLs and primary care physicians

Published Research¹ indicates physicians would use PromarkerD to inform patient treatment decisions

- 96% of physicians were likely to use PromarkerD test scores for clinical decision-making
- PromarkerD consistently ranked as one of the top 2 factors driving physician decision-making
- Survey of 400 Endocrinologists & Primary Care Physicians (US based)



^{*} SGLT2-inhibitor class of medications are already widely used for the treatment of diabetes, and now also indicated for cardiovascular disease and DKD.

[#]ACE Inhibitor class of medications are commonly used for the treatment of high blood pressure and heart failure.

PromarkerD: Diabetic Kidney Disease



Intellectual Property	-0-	Patents granted in all major jurisdictions - PromarkerD Patent family & Trademark covers 72% of the world's diabetes patients
Regulatory		CE Mark (EU) registration received for the PromarkerD Immunoassay IVD US sales utilising Lab Developed Test (LDT) pathway via CLIA certified laboratory & ISO 15189 pathway in Australia
Manufacturing Scale-up	4	ISO 13485 certified EU manufacturer Simple technology platform (immunoassay) – easy to use and integrate into existing pathology lab processes
Peer Reviewed	Ø	PromarkerD tested on over 5,000 patients in 4-year clinical studies Global multi-centre clinical study (CANVAS) on 3,568 participants in collaboration with Janssen (J&J) Janssen Clinical & analytical validity proven (Sensitivity 86%); 10+ Peer Reviewed Publications
Physician Support	Topos.	Clinical utility demonstrated - US based survey showed 96% of physicians were likely to use PromarkerD test scores for clinical decision making; PromarkerD consistently ranked as one of the top 2 factors driving physician decision-making.
Outperforms Standard of Care		857 community-based patients tested for existing DKD at baseline: 497 had normal kidney function PromarkerD accurately predicted 84% (N=38); All were missed by Standard of Care tests
The Need	•••	Economic Cost: Chronic Kidney Disease cost Australia A\$9.9bn in 2021 (Kidney Health Australia) - investment in early detection could yield a net benefit of \$10.2bn over 20 years; Kidney Research UK have declared a public health emergency - by 2033 kidney disease risks costing the UK economy £13.9bn annually
The Treatments	(New renal protective therapies: SGLT2-inhibitors & GLP-1 agonists (eg semaglutide (Ozempic)) PromarkerD identifies patients for better management of diabetes, adherence to medications, and focus on diet & exercise
The Utility	<u>*</u>	Complementary diagnostic - Early diagnosis of DKD using PromarkerD can help inform doctors' treatment decisions to improve clinical outcomes for patients. Actions taken BEFORE the onset of DKD
Expanding Use	Ť T1D	PromarkerD validated for Type 1 (T1D) diabetes - demonstrated high accuracy (AUC of 0.93) in predicting chronic kidney disease in patients with T1D (represents 10% of all diabetes cases); Offers a new target market



PromarkerD: What are our Key Opinion Leaders saying?

My impression on Promarker®D market release

Professor Merlin Thomas, MBChB, PhD, FRACP, FAAHMS
Nephrologist
Department of Diabetes, Monash University, Australia



"When kidney function is lost, it is lost forever.
Identifying people at increased risk of developing
impaired kidney function before this function is
irreversibly gone is the best way to protect their kidneys
and their health."

The saddest thing you hear as a nephrologist is the regret, "I wish I had known earlier!"

"There has been a sea-change in relation to the management of cardiorenal metabolic disorders with the recognition of the need to take a more preventative approach rather than waiting until cardiorenal damage has occurred.

Waiting for the appearance of albuminuria and cardiovascular disease should no longer be our number one priority and PromarkerD may offer people with diabetes an opportunity to manage risk before damage has occurred."



Dr Andrew Frankel, MBBS, BSc, MD, FRCP Consultant Physician and Nephrologist Imperial College Healthcare NHS Trust, UK



The Naked Scientists Podcast

Proteomics promises a revolution in preventative medicine podcasts.apple.com/au/podcast/proteomics-promises-a-revolution-in-preventative/id74171648?i=1000733890692



Proteomics International (Est'd 2001)

Identity

Proteomics International is a medical technology company specialising in predictive diagnostics and advanced analytical services using proteomics – the industrial scale study of the structure and function of proteins.

Mission

To improve the quality of lives by the creation and application of innovative tools that enable the improved treatment of disease.

Vision

To help create a world where disease is detected early and cured simply.