

Date: 11 March 2026

Attention: Eastern Cape Gambling Board

Dear Sir/Madam,

**RE: PUBLIC DISPLAY COPIES IN TERMS OF SECTION 25 IN SUPPORT OF BETXCHANGE EASTERN CAPE (PTY) LTD (2014/097752/07) APPLICATION FOR REMOVAL OF BUSINESS TO OTHER PREMISES**

1. This public inspection copy has been redacted to exclude all confidential information. A complete and unredacted version of the application has been submitted to the Eastern Cape Gambling Board.
  
2. Please be advised that the following documents have been excluded from the public inspection copy and are to remain confidential.
  - 2.1. Annexure C – betXchange Eastern Cape (Pty) Ltd Shareholding
  - 2.2. Annexure D – Commercial Lease agreement
  
3. We trust that you will find the above is in order.
  
4. Please do not hesitate to contact us via email [jade@betxchange.co.za](mailto:jade@betxchange.co.za) should you have any questions.

betXchange Eastern Cape (Pty) Ltd. t/a

betXchange



*Yours faithfully.*

A handwritten signature in black ink, appearing to be 'Ryan Nicholas Ho', written over a horizontal line.

**Ryan Nicholas Ho**

**(Director)**

19 Thora Crescent, Wynberg, Sandton, 2090, Gauteng, South Africa  
P.O. Box 388, Benoni, 1500, Gauteng, South Africa  
Tel +27 11 712 4610 / +27 11 712 4710  
REG 2014/O97752/O7

betXchange Eastern Cape (Pty) Ltd trading as Keith Ho betXchange is a licensed bookmaker with the Eastern Cape Gambling Board. In the event of a dispute, individuals may approach the Eastern Cape Gambling Board directly to lodge complaints. Keith Ho betXchange supports the National Responsible Gambling Programme. No persons under the age of 18 are permitted to gamble. National Responsible Gambling Programme toll free counselling line 0800 006 008 or WHATSAPP HELP to 076 675 0710.

**APPLICATION FOR REMOVAL OF BUSINESS TO OTHER PREMISES**

SIGNATURE: \_\_\_\_\_



(ecgb/removprem)

### APPLICATION INSTRUCTIONS

1. Any person who wishes to apply for a removal of business to other premises shall complete and submit an application on the Gambling Regulation System (GRS) at <https://ecgbgrs.org.za/>;
2. Read the instructions carefully before answering any of the questions. Any incomplete or inaccurate answer may result in no action being taken on the application, or denial of the application.
3. Each Application must be completed in English by the authorized representative of the Applicant.
4. a loose-leaf copy of the Application must be supplied as an attachment for public inspection, with the appropriate confidential pages removed.
5. For the purposes of this application, “enterprise” is defined to include any corporation, company, association, operation, firm partnership, trust or other form of business association, and any sole proprietor or natural person.
6. Answer every question fully and truthfully. Do not leave any blank spaces. If a question does not apply to you, indicate N/A (for “Not Applicable”) in response to that question. If there is nothing to disclose about a particular question, write “None”.
7. Complete the Statement of Truth and all Release Authorisation section; and
8. Refer to Schedule II Part A of the Eastern Cape Gambling Act, 1997 (as amended) (“the Act”) as well as any notice issued by the Board from time to time for the applicable non - refundable application fee.

**IMPORTANT NOTICE**

1. You must immediately notify the Eastern Cape Gambling Board of any change of address. All notices regarding this application will be sent to the address that you provide on this form.
2. Any person who applies to the Board for a licence as a bookmaker is required to submit to searches without a warrant when present on licensed premises pursuant to section 76 of the Eastern Cape Gambling Act, 1997 (“the Act”).
3. Information supplied to the Board, or otherwise obtained by it, is confidential and may not be revealed except, in the course of administrating the Act, upon the lawful order of a court of competent jurisdiction. Nevertheless, an applicant or a licence holder waives any liability of the Eastern Cape Gambling Board, its instrumentalities and its agents, for any damages resulting from any disclosure or publication in any manner, other than a wilfully unlawful disclosure or publication, pursuant to section 76 of the Eastern Cape Gambling Act, 1997.

## APPLICATION FOR REMOVAL TO OTHER PREMISES

I, Ryan Nicholas Ho on behalf of the applicant hereby apply in terms of the Eastern Cape Gambling Act, 1997 , for removal of business to other premises and confirm being aware of and understanding the provisions of the said Act and Regulations, insofar as they pertain to this application.

Full name of applicant betXchange Eastern Cape (Pty) Ltd

Physical business address 19 Thora Crescent, Wynberg, Sandton

2090

Postal address 19 Thora Crescent, Wynberg, Sandton

2090

Telephone number 011 712 4610

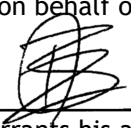
Telefax number N/A

E-Mail address jade@betxchange.co.za

For and on behalf of the applicant

06 March 2026

Date

  
 (who warrants his authority)

Ryan Nicholas Ho

Name (Print)

Director

Capacity of signatory

**APPLICATION FOR REMOVAL OF BUSINESS TO OTHER PREMISES**

Type of licence (i.e. Gambling site licence, bookmaker, totalisator, etc.):  
Bookmaker Licence

Provide current licence number (if applicable):  
ECBM 019-01

Provide previous licence numbers (if applicable):  
N/A

**NAME AND REGISTRATION NUMBER OF ENTERPRISE**

BETXCHANGE EASTERN CAPE (PTY) LTD (2014 / 097752 / 07)  
 \*Name as appears on or in the certificate of incorporation, memorandum, articles, founding statement or other official document. DO NOT ABBREVIATE

**TRADE NAME(S)**

Keith Ho betXchange

Person to be contacted with reference to these forms:

NAME	
Jade Joshua	
TITLE	TELEPHONE NO. (INCLUDE AREA CODE)
Compliance Manager	+27 61 065 3589

**CURRENT PREMISES**

The principal business address of the enterprise:

<b>STREET LOCATION (NUMBERS/STREET)</b> Shop 6A & B Buffalo Centre No 42-44 Buffalo Street	<b>CITY</b>  East London	<b>PROVINCE/STATE</b>  Eastern Cape	<b>POSTAL CODE</b>
<b>COUNTRY</b> South Africa	<b>TELEPHONE NO. OF THIS LOCATION (INCLUDE AREA CODE)</b>  011 712 4610		
<b>MAILING ADDRESS (IF DIFFERENT)</b>	<b>CITY</b>	<b>PROVINCE/STATE</b>	<b>POSTAL CODE</b>

Current/ existing premises licensed by the Board which the applicant is applying for the removal of:

**ADDRESS 1**

<b>STREET LOCATION (NUMBERS/STREET)</b> Shop Number 5, St Georges, 2-4 Rink Street Central,	<b>CITY</b>  Port Elizabeth	<b>PROVINCE/STATE</b>  Eastern Cape	<b>POSTAL CODE</b>
<b>COUNTRY</b> South Africa	<b>TELEPHONE NO. OF THIS LOCATION (INCLUDE AREA CODE)</b>  011 712 4610		

**ADDRESS 2**

<b>STREET LOCATION (NUMBERS/STREET)</b>	<b>CITY</b>	<b>PROVINCE/STATE</b>	<b>POSTAL CODE</b>
<b>COUNTRY</b>	<b>TELEPHONE NO. OF THIS LOCATION (INCLUDE AREA CODE)</b>		

**ADDRESS 3**

<b>STREET LOCATION (NUMBERS/STREET)</b>	<b>CITY</b>	<b>PROVINCE/STATE</b>	<b>POSTAL CODE</b>
<b>COUNTRY</b>	<b>TELEPHONE NO. OF THIS LOCATION (INCLUDE AREA CODE)</b>		

**ADDRESS 4**

<b>STREET LOCATION (NUMBERS/STREET)</b>	<b>CITY</b>	<b>PROVINCE/STATE</b>	<b>POSTAL CODE</b>
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COUNTRY	TELEPHONE NO. OF THIS LOCATION (INCLUDE AREA CODE)
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**ADDRESS 5**

STREET LOCATION (NUMBERS/STREET)	CITY	PROVINCE/STATE	POSTAL CODE
COUNTRY	TELEPHONE NO. OF THIS LOCATION (INCLUDE AREA CODE)		

**ADDRESS 6**

STREET LOCATION (NUMBERS/STREET)	CITY	PROVINCE/STATE	POSTAL CODE
COUNTRY	TELEPHONE NO. OF THIS LOCATION (INCLUDE AREA CODE)		

**ADDRESS 7**

STREET LOCATION (NUMBERS/STREET)	CITY	PROVINCE/STATE	POSTAL CODE
COUNTRY	TELEPHONE NO. OF THIS LOCATION (INCLUDE AREA CODE)		

**ADDRESS 8**

STREET LOCATION (NUMBERS/STREET)	CITY	PROVINCE/STATE	POSTAL CODE
COUNTRY	TELEPHONE NO. OF THIS LOCATION (INCLUDE AREA CODE)		

**NEW/INTENDED PREMISES IF APPLICATION IS SUCCESSFUL**

The principal business address of the enterprise if the application is successful:

STREET LOCATION (NUMBERS/STREET) Shop 12 Rink Street Central	CITY Port Elizabeth	PROVINCE/STATE Eastern Cape	POSTAL CODE 6001
COUNTRY South Africa	TELEPHONE NO. OF THIS LOCATION (INCLUDE AREA CODE) 011 712 4610		
MAILING ADDRESS (IF DIFFERENT)	CITY	PROVINCE/STATE	POSTAL CODE

The addresses of new premises from which the enterprise intends to conduct its business if the application for removal of business is successful:

**ADDRESS 1**

STREET LOCATION (NUMBERS/STREET) Shop 12 Rink Street Central	CITY Port Elizabeth	PROVINCE/STATE Eastern Cape	POSTAL CODE 6001
COUNTRY South Africa	TELEPHONE NO. OF THIS LOCATION (INCLUDE AREA CODE) 011 712 4610		

Existing premises  New premises

**ADDRESS 2**

STREET LOCATION (NUMBERS/STREET)	CITY	PROVINCE/STATE	POSTAL CODE
COUNTRY	TELEPHONE NO. OF THIS LOCATION (INCLUDE AREA CODE)		

Existing premises  New premises

**ADDRESS 3**

STREET LOCATION (NUMBERS/STREET)	CITY	PROVINCE/STATE	POSTAL CODE
COUNTRY	TELEPHONE NO. OF THIS LOCATION (INCLUDE AREA CODE)		

Existing premises  New premises

**ADDRESS 4**

STREET LOCATION (NUMBERS/STREET)	CITY	PROVINCE/STATE	POSTAL CODE
COUNTRY	TELEPHONE NO. OF THIS LOCATION (INCLUDE AREA CODE)		

Existing premises

New premises

**ADDRESS 5**

STREET LOCATION (NUMBERS/STREET)	CITY	PROVINCE/STATE	POSTAL CODE
COUNTRY	TELEPHONE NO. OF THIS LOCATION (INCLUDE AREA CODE)		

Existing premises

New premises

**ADDRESS 6**

STREET LOCATION (NUMBERS/STREET)	CITY	PROVINCE/STATE	POSTAL CODE
COUNTRY	TELEPHONE NO. OF THIS LOCATION (INCLUDE AREA CODE)		

Existing premises

New premises

**ADDRESS 7**

STREET LOCATION (NUMBERS/STREET)	CITY	PROVINCE/STATE	POSTAL CODE
COUNTRY	TELEPHONE NO. OF THIS LOCATION (INCLUDE AREA CODE)		

Existing premises

New premises

**ADDRESS 8**

STREET LOCATION (NUMBERS/STREET)	CITY	PROVINCE/STATE	POSTAL CODE
COUNTRY	TELEPHONE NO. OF THIS LOCATION (INCLUDE AREA CODE)		

Existing premises

New premises

- A. State all other addresses currently occupied/held by the enterprise and all addresses from which the enterprise is currently conducting business.

NUMBER AND STREET	CITY	PROVINCE	POSTAL CODE
Shop 6A & 6B Buffalo Centre	East London	Eastern Cape	
Shop No 5 St Georges Corner 2-4 Rink Street Central	Port Elizabeth	Eastern Cape	

- B. State all addresses, other than those listed above, which the enterprise occupied/held or from which it was conducting business during the last ten (10) years and give the approximate periods of time during which such addresses were occupied/held.

NUMBER AND STREET	CITY	PROVINCE	POSTAL CODE	FROM	TO
Shop No 6 Cleary Park Shopping Centre, Bethelsdorp	Port Elizabeth	Eastern Cape			
70 Adams Street Bethelsdorp	Port Elizabeth	Eastern Cape			

#### **ITEM 1. SITE LOCATION AND SIZE**

- A. Applicants shall describe the overall design of the proposed new premises in terms of:
- i its size and prominence in terms of location and visibility; and
  - ii nearby land uses.
- B. Site and locality plans, including a floorplan of the new premises indicating those portions on which gambling activities shall be conducted and which need to be licensed, shall be provided.
- C. Plans or maps showing how the gambling business fits into surrounding areas are to be provided.
- D. Details shall be provided regarding the current ownership of each of the new premises. Evidence of pre-contracts guarantees or options regarding site availability shall be provided, together with any potential legal (e.g. potential land restitution claims) or physical impediments to site occupation and development.
- E. A copy shall be provided of any valid lease agreements for the lease of the new premises.

- F. Details of any persons having a financial interest of 5% or more in the lessor of the new premises shall be provided.
- G. The current status of negotiations in respect of the new land and/or buildings, if applicable, shall be disclosed.
- H. Local authority comments on land rights of the new premises shall be provided.
- I. The Board's development and design objectives for gambling enterprises will best be achieved by premises that provide for all facilities to be of a quality standard sufficient to satisfy the expectations of local citizens. This would include adequate public facilities.
- J. Applicants should summarise how their gambling business on those premises is likely to impact on the surrounding neighbourhood environment and land uses.

**NOTE:** For purposes of this item details of existing premises which are already licensed need not be supplied, only **new** premises for which a licence is required.

**ITEM 2. DECLARATION**

Pursuant to the regulations of the Board, this form must be sworn to or affirmed by the Applicant or an authorised representative of the Applicant.

**DECLARATION**

I, Ryan Nicholas Ho the

authorized representative of the Applicant hereby acknowledge that I am aware that the Board may deny a licence or registration to any applicant that supplies information to the Board which is untrue or misleading as to a material fact pertaining to the qualification criteria.

Further, I hereby swear (or affirm) that the foregoing statements made by me on behalf of the Applicant are true. I am aware that if any of the foregoing statements made by me are wilfully false, I will be subject to the penalty attendant upon perjury.

**ITEM 3. RELEASE AUTHORISATION - NOTICE**

Each Applicant or representative thereof must acknowledge the release of information and notice below.

A copy of the resolution by the company or close corporation authorising the person referred to above must be attached hereto.





## **ITEM 1. SITE LOCATION AND SIZE**

A. Property Location: Shop 12 Rink Street Central, 6001, Port Elizabeth.

Property Size: 50m2

B. See attached floor plan of the new premises indicating portions on which gambling activities shall be conducted, which is annexed hereto marked "A"

C. See attached map showing how the gambling business fits into surround areas, which is annexed hereto marked "B".

D. Current Ownership of the Business.

Please see attached shareholding diagram, which is annexed hereto marked "C".

E. Ownership of new premises: Ethiopian Apostolic Church Inter Fellowship 083-395 NPO

The company has finalised lease agreement for Shop 12 Rink Street Central, 6001, Port Elizabeth, please see annexed hereto marked "D".

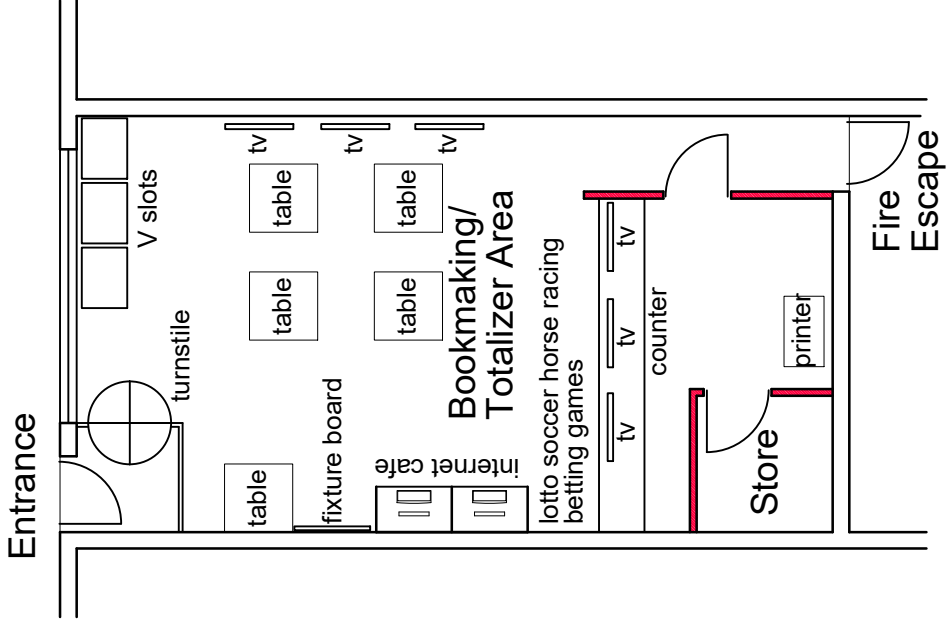
F. Please refer to above shareholding diagram.

G. Please refer to above lease agreement.

H. Local authority comments on land rights of the new premises shall be provided

The Board will be furnished with this in due course.

"A"



Ground Storey Plan

1:100

KEITH HO BETXCHANGE - 12 RINK ROAD



- Menu icon
- Saved
- Recents
- 12 Rink St
- Cape Town
- Bluff
- View more
- Get app

12 Rink St



### 12 Rink St

- Directions
- Save
- Nearby
- Send to phone
- Share

- 12 Rink St, Gqeberha Central, Gqeberha, 6001
- Suggest an edit on 12 Rink St
- Add a missing place
- Add your business
- Add a label
- Your Maps history

### Photos



Restaurants Hotels Things to do Transit Parking Pharmacies ATMs

Port Elizabeth Provincial Hospital

Beer Yard

KFC Albany Road

Grey High School

GQEBERHA CENTRAL

Savages Fine Food

St George's Park Conservatory

Nelson Mandela Metropolitan Art...

St George's Park

Life St George's Hospital

ESSEXVALE

Layers

Google Maps

Imagery ©2026, Map data ©2026 AfriGIS (Pty) Ltd, Google South Africa Terms Privacy Send Product Feedback 200 m

Date: 10/03/2026 Time: 5:04:58 PM

Profile name:	KEITH HO RACING (PTY) LTD
Batch reference number:	228858832
Payment reference number:	000000005706280802
Payment date:	10/03/2026
Payment capture date:	10/03/2026
Payment authorise date and time:	10/03/2026 04:34:46 PM
From account name:	*BETXCHANGE (EASTERN CAPE) (PTY) LTD
From account description:	1075679605
From account statement description:	4060/Rink Applic Fee
Beneficiary account number:	81207840
Beneficiary/ Recipient name:	ECGBB
Beneficiary statement description:	Betx EC Application Fee
Branch code:	051001
Amount:	200.00
Real-time:	No

Additional comments by payer:

View your account to **confirm that you have received this payment.**

- All payments are subject to clearing rules.

Please refer to landing page for cut off times and telephone numbers.

Date: 10/03/2026 Time: 5:04:36 PM

Profile name:	KEITH HO RACING (PTY) LTD
Batch reference number:	228858832
Payment reference number:	000000005706280801
Payment date:	10/03/2026
Payment capture date:	10/03/2026
Payment authorise date and time:	10/03/2026 04:34:46 PM
From account name:	*BETXCHANGE (EASTERN CAPE) (PTY) LTD
From account description:	1075679605
From account statement description:	4060/Rink Invest Dep
Beneficiary account number:	81207840
Beneficiary/ Recipient name:	ECGBB
Beneficiary statement description:	Betx EC Investigation Dep
Branch code:	051001
Amount:	45,000.00
Real-time:	No

Additional comments by payer:

View your account to **confirm that you have received this payment.**

- All payments are subject to clearing rules.

Please refer to landing page for cut off times and telephone numbers.