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 rights are attached:		Alpha Tiger Property Trust Limited			
2. Reason for notification (yes/no)		_			
An acquisition or disposal of voting rights			Yes		
An acquisition or disposal of financial instruments which may result in the acquisition of shares already issued to which voting rights are attached					
An event changing the breakdown of voting rights	i				
Other (please specify):					
3. Full name of person(s) subject to notification obligation:		QVT Financial LP			
4. Full name of shareholder(s) (if different from 3):		QVT Fund LP			
5. Date of transaction (and date on which the threshold is crossed or reached if different):		5 June 2007			
6. Date on which issuer notified:		8 June 2007			
7. Threshold(s) that is/are crossed or reached:		15%			

8: Notified Details									
A: Voting rights attached to shares									
Class/type of shares If possible use ISIN code	the triggeri	Situation previous to the triggering transaction		Resulting situation after the triggering transaction					
	Number of shares	Number of voting	Number of shares		Number of voting rights		Percentage of voting rights		
	rights	Oi oilaice	Dire		Indirect	Dire		Indirect	
Ordinary Shares	7,900,000	7,900,000	10,525,000			10,525,000			15.72%
B: Financia	al Instrume	ents							
Resulting sit	uation after f	the triggeri	ng transacti	on					
Type of financial instrument		Expiration date E		Exercise/ conversion period/date		No. of voting right that may be acqui (if the instrument exercised/convert			entage of g rights
Total (A+B)								
Number of vo	Number of voting rights			Percentage of voting rights					
10,525,000			15.72%						
9. Chain of financial in			_	_			g rig	hts ar	nd /or the
manolalii	istraments	Tare error	savery new	u, ii u	ррпос				
Proxy Voti	ng:								
10. Name o	of proxy ho	older:							
11. Numbe holder will	_	•	оху						
12. Date or cease to he	•	_	r will						

13. Additional information:	
14 Contact name:	Lars Bader
15. Contact telephone name:	+1 212 705-8800

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