FY26 Audited Full Year Results

Highlights:

- **Revenue of $4.2m, down 10% on pcp, reflecting customer requested deferral of hardware deliveries into FY27**
- **Positive operating cash flow in 2H FY26**
- **Net operating cash outflow improved 60% to $1.3m (FY25: $3.2m)**
- **Underlying EBITDA loss reduced by 34% to $1.6m (FY25: $2.5m)**
- **Statutory loss before tax reduced by 84% to $0.6m (FY25: $3.7m)**
- **Gross margin increased to 86% (FY25: 78%)**
- **Subscription and support revenue grew 27% to $1.7m, now 41% of Group revenue (FY25: 29%)**
- **$1.9m Annual Recurring Revenue (ARR) as at 30 June 2026, up 3% on pcp**
- **Net liabilities reduced from $1.8m to $0.015m and borrowings reduced from $2.5m to $0.6m**
- **$1.6m cash as at 30 June 2026; current ratio improved to 104%, up 16 percentage points on pcp**
- **Signed and expanded contracts with leading government healthcare bodies and corporate customers, including NSW Health, Amplar Health (Medibank), Royal Flying Doctor Service (SA/NT), Aspen Medical (Origin Energy, CSIRO) and BlueCare Queensland**

Visionflex Group Limited ("**VFX**" or the "**Company**"), a leader in virtual healthcare technology, is pleased to today release its audited financial results for the 12 months ending 30 June 2026.

The FY26 Results Investor Presentation is attached to this announcement.

The FY26 Results Investor Presentation is accompanied by the following separate ASX Announcements:

- The 2026 Annual Report, which includes the Company's audited financial statements
- The Appendix 4E for FY26
- The Appendix 4G and Corporate Governance Statement

2026 Annual General Meeting and Closing Date for Director Nominations

In accordance with ASX Listing Rule 3.13.1, Visionflex advises that its 2026 Annual General Meeting will be held on Thursday, 19 November 2026. The time and other details relating to the AGM will be advised in the Notice of Meeting which will be made available to shareholders and released to the ASX immediately after dispatch.
In accordance with Visionflex's Constitution, valid nominations for the position of director are required to be lodged at the registered office of the Company by 5:00pm (AEDT) on Thursday, 8 October 2026.

-- END --

This announcement was approved for release by the Board of Directors.

For more information:

Joshua Mundey
Managing Director and CEO, Visionflex Group
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About Visionflex Group

At Visionflex, we believe that healthcare should be accessible, efficient, and connected. Our integrated hardware and software platform allows healthcare providers to deliver comprehensive, collaborative care in real time, no matter the location. From metropolitan health networks to community-based care, Visionflex is reshaping how healthcare is delivered by connecting healthcare teams with the tools and technology needed to provide effective, efficient, and high-quality care. For more information, visit vfx-group.com.

Visionflex Group

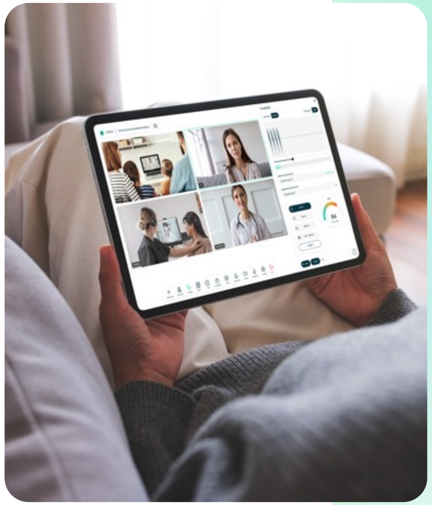
ASX:VFX

FY26 Results Investor Presentation

28 AUGUST 2026

The Visionflex mission

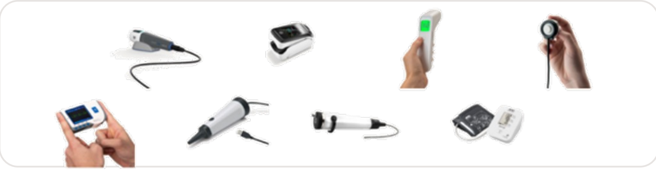
Empowering health practitioners globally with cutting edge technologies to elevate patient outcomes.



Visionflex proprietary software and hardware connect a range of third-party medical devices to empower practitioners to deliver world class virtual care.

Hardware

Visionflex hardware enables health practitioners to virtually conduct medical examinations with confidence and serves as a foundational step for establishing long term software subscriptions.

PERIPHERALS + SOFTWARE	DEVICE + PERIPHERALS + SOFTWARE	MEDICAL CART + PERIPHERALS + SOFTWARE
		
GEIS® Camera and peripheral devices integrated with Visionflex software, to deliver clinical consultations virtually.	Mobile solution, including tablet/laptop, GEIS® Camera and peripherals, integrated with Visionflex software, to deliver clinical consultations virtually.	Medical cart, all-in-one computer, PTZ and GEIS® Camera, peripherals, integrated with Visionflex software, to deliver clinical consultations virtually in healthcare setting.
$5K-$15K HARDWARE PER UNIT	$15K-$20K HARDWARE PER UNIT	$20K-$50K HARDWARE PER UNIT

Software licensing fee ~$5k per annum

Clients that have existing medical devices and require virtual clinical consultation capability in any setting.	Clients that require mobile devices to deliver virtual clinical consultations (i.e., in-home care, out-patient services, rural health care and GP clinics).	Clients that are in physical healthcare settings that require virtual clinical consultation capabilities (i.e., hospitals, aged care and correctional facilities, rural health care and GP clinics).

Proprietary Software (Virtual Care Platform)

A clinically capable comprehensive virtual healthcare platform empowering practitioners to virtually examine, diagnose, monitor and treat patients remotely.

ProEXSoftware

Perform collaborative, clinical, evidence-based consultations between clinicians and patients in any location.

Clinical grade consultations: Perform in-depth clinical consultations on any internet connected device.

Real time clinical data: Connectivity with a multitude of peripheral diagnostic devices providing real time clinical data.

Connect multiple cameras: Simultaneously include feeds from multiple medical cameras within the consultation.

Secure patient data: Capture and securely transfer sensitive patient data of video, images and information into electronic health records.

vision. by Visionflex

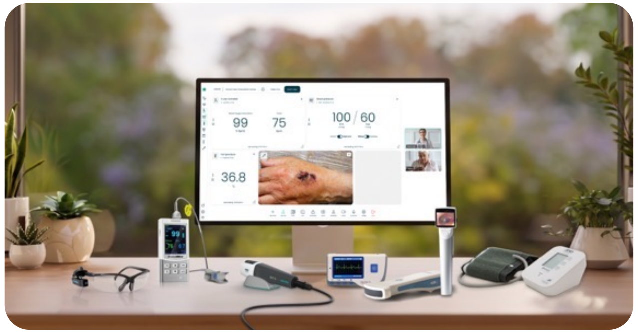
A user-friendly video conferencing platform that delivers health services and medical expertise to patients via internet connected devices.

Enhanced video conferencing: Delivers diagnostic-quality video and audio, with high-speed data transmission and end-to-end encryption.

Real time data access: Integrates seamlessly with the Visionflex clinical data component Software, allowing patient health data to be collected, viewed, and shared real time.

Stethoscope audio transmission: Digitally transmits the full clinical audio spectrum of a stethoscope, which conventional video conferencing platforms filter out.

Image capture and sharing: Capture, annotate and instantly share clinical images while conducting video consultations for live discussion and collaboration.



NEW FEATURE

Unattended Access Capability

A clinician can lead a complete consultation and operate clinical examination devices remotely with no operator required at the patient end. For deployment in unstaffed clinics, remote resources operations and after-hours aged care.

Visionflex Group

FY26 Highlights

FY26 Financial Summary

Disciplined cost management and a higher margin revenue mix drove a material reduction in the underlying loss and a return to positive operating cash flow in the second half.

Visionflex revenue	Subscription revenue (Software and support)	Gross margin	Underlying EBITDA[2]	Annual Recurring Revenue
$4.2m	$1.7m	86%	($1.6m)	$1.9m
▼ -10%[1]	▲ 27%[1]	▲ 8pts[1]	▼ $0.8m[1]	▲ 3%[1]

Cash	Current Ratio	Borrowings	Net Cash Position[3]	Net asset ratio
$1.6m	104%	$0.6m	$1.0m	100%
▼ -$0.3m[1]	▲ 16pts[1]	▼ -$1.9m[1]	▲ $1.6m[1]	▲ 34%[1]

1. Comparison to prior corresponding period (FY25 – June 2025) for the data shown above
2. Underlying EBITDA = normalised underlying EBITDA, being loss before tax adjusted for depreciation, amortisation, share-based payments, fair value gain on convertible note conversion, restructuring and other non-operating/one-off costs, and finance costs
3. Net cash position is defined as total cash less borrowings
4. Presented above is Visionflex's key financial metrics. For a detailed group statutory Profit and Loss, refer to the Appendix 4E & FY26 Annual Report – 30 June 2026

Key Customer Wins – FY26

Visionflex continued to broaden its enterprise and government customer base across FY26.

NSW Health	Amplar Health	aspenmedical	Royal Flying Doctor Service
Secured a statewide contract with NSW Health to supply Visionflex clinical hardware for its Remote Patient Monitoring Digital Uplift initiative. TCV of ~$0.8m, signed and delivered in Q4 FY26.	Partnership with Amplar Health (Medibank) continued to scale in residential aged care, with paid deployments growing from 10 to 30 facilities across the year. TCV of ~$0.6m signed in FY26.	Strategic Partnership with Aspen Medical which has secured contracts for the deployment of Visionflex solutions for Origin Energy and the CSIRO. TCV of ~ $0.1m signed in FY26.	New contracts with Royal Flying Doctor Service SA/NT spanning subscription upgrades across 12 facilities, expansion into a further 8, and development of Visionflex's new unattended access capability, for which RFDS SA/NT is the first customer. TCV of ~$0.3m signed in FY26; network deployment begins Q1 FY27.

Key Customer Wins – FY26

Broadening enterprise, government and international pipeline.

BlueCare
Live life your way

BlueCare Queensland renewed 26 facilities during the year, reflecting strong customer retention.

TCV of ~$0.1m in FY26.

US EXPANSION

New contracts secured through distribution partners Avnet and ePlus in the United States, extending Visionflex's footprint into corporate and resources health and reinforcing its US presence.

TCV of ~$0.2m signed in FY26.

INDIGENOUS HEALTH

Expanded footprint in Indigenous health, securing six new virtual care deployments across Aboriginal Community Controlled Health Organisations, including a purpose fitted remote mobile clinic with Urapuntja Health in the Northern Territory.

TCV of ~$0.1m in FY26.

REGIONAL PHN's

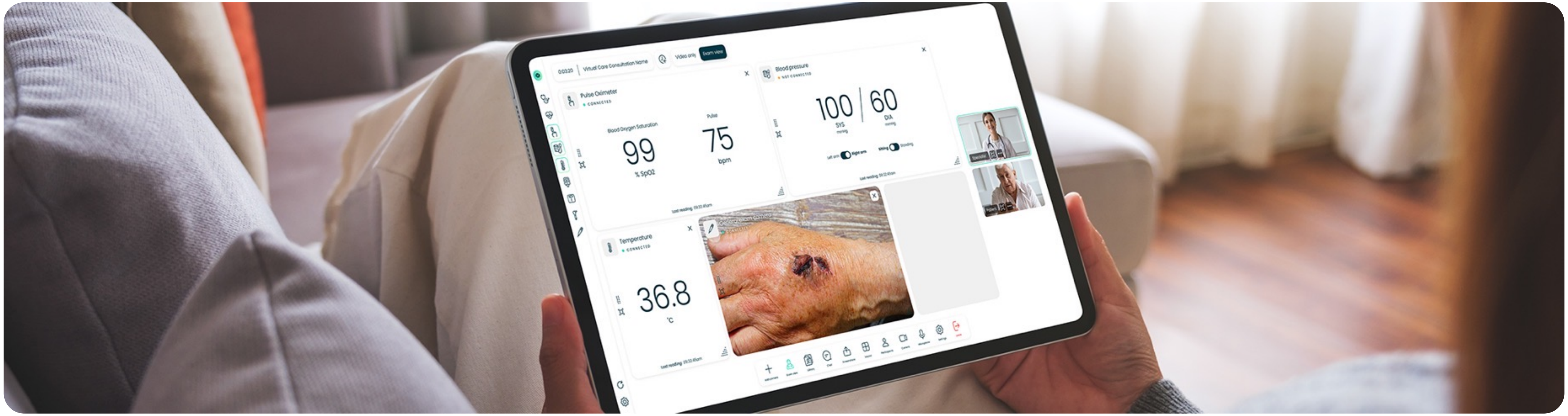
New contracts secured with Western NSW and North Coast Primary Health Networks.

TCV of ~$0.2m in FY26.

Visionflex Group

PRODUCT INNOVATION

Unattended Access Capability



Product Innovation – Unattended Access Capability

A new product category enabling virtual care in settings where staffing a local operator has not been practical.

1. Clinician leads the consultation remotely
2. Live control of clinical examination devices via the Visionflex platform
3. No trained operator required at the patient site

MARKET OPPORTUNITY

Removes the requirement for a second, trained operator at the patient site, opening deployment into unstaffed clinics, remote resources operations and after-hours aged care settings as a supported, repeatable configuration.

FIRST CUSTOMER

Royal Flying Doctor Service (SA/NT) is the first customer, as part of ~$0.3m of new FY26 contracts covering subscription upgrades and unattended access development. Network deployment is forecast to begin in Q1 FY27.

FY27 PRIORITY

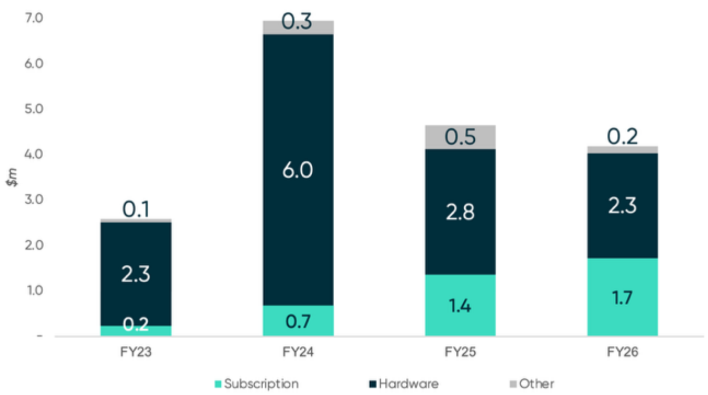
Scale unattended access beyond its first deployment with RFDS SA/NT into other regional, resources and aged care settings, as outlined in the Company's FY27 growth priorities.

FY26 Financial Overview

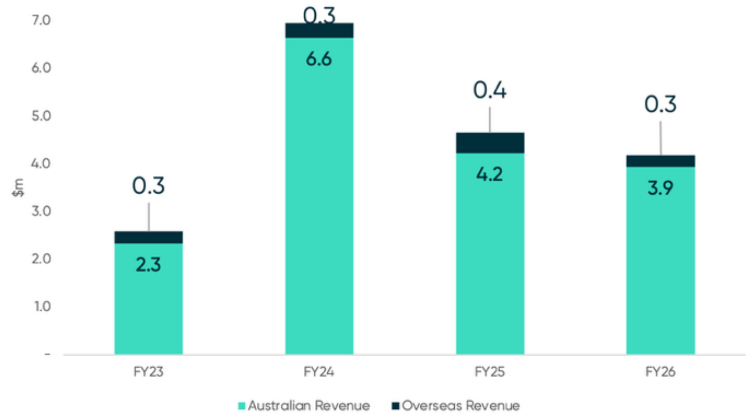
Financial Dashboard

Multi-year trend of margin quality improvement and recurring revenue growth.

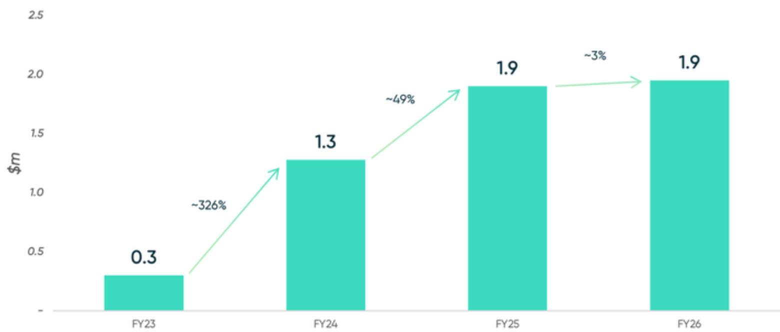
Revenue
(by type)



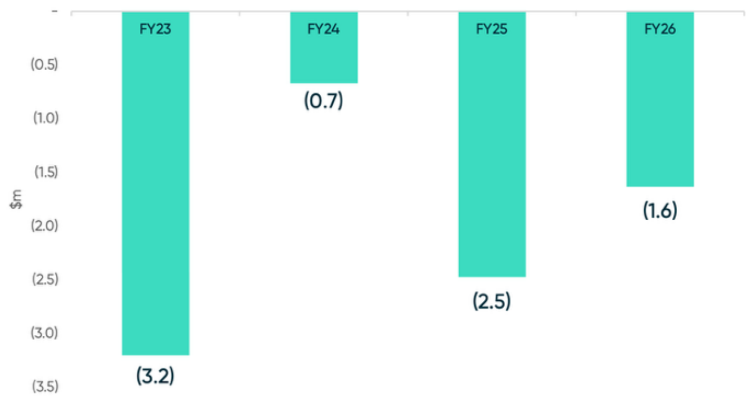
Revenue
(by region)



ARR
Growth



Underlying
EBITDA



Profit & Loss

A higher margin revenue mix and cost discipline drove a material narrowing in underlying losses, and the Group enters FY27 with a materially lower cost base.

PROFIT AND LOSS – 30 JUNE Y/E ($000)		FY26	FY25	% VAR
Subscription revenue (software & support)	1	1,724	1,357	27%
Hardware	2	2,304	2,766	(17%)
Other	3	156	530	(71%)
Total Revenue		**4,185**	**4,653**	**(10%)**
COGS		(568)	(1,017)	(44%)
Gross profit		**3,616**	**3,636**	**(1%)**
Gross profit margin %	4	86%	78%	8pts
Staff costs	5	(4,014)	(4,635)	(13%)
Operating costs		(1,233)	(1,469)	(16%)
Total Operating costs		**(5,247)**	**(6,104)**	**(14%)**
Underlying EBITDA	6	**(1,631)**	**(2,468)**	**(34%)**
Fair value gain on conversion of convertible notes	7	1,625	–	n/m
Restructuring costs		(52)	(4)	1,176%
Share based payments		(318)	(638)	(50%)
Legacy Inventory Write Down		–	(252)	n/m
EBITDA		**(376)**	**(3,362)**	**(89%)**
Depreciation and amortisation		(56)	(71)	(22%)
Other non-operating costs		(7)	(6)	15%
Interest revenue		–	–	n/m
Finance costs	8	(157)	(292)	(46%)
Profit/(Loss) before tax (PBT)		**(596)**	**(3,731)**	**(84%)**

1. Software and support revenue grew 27% to $1.7m and represented 41% of Group revenue (FY25: 29%), reflecting the Company's continued shift toward recurring, subscription-based income.
2. Hardware revenue declined 17% to $2.3m, reflecting customer requested deferrals of deliveries into FY27.
3. Other revenue recognized in FY25 included a $0.4m grant from Hunter New England PHN.
4. Gross margin expanded to 86% (FY25: 78%), driven by the increasing mix of higher margin subscription revenue and the mix of hardware sales having higher margin peripheral sales.
5. Staff costs reduced 13%, with a workforce restructuring completed in February 2026 now fully reflected in the run rate, partially offset by continued investment in sales and delivery capability.
6. Underlying EBITDA loss of $0.3m in 2H FY26 v $1.3m reflecting a combination of seasonality of orders and the materially lower cost base of operations.
7. A $1.6m non-cash fair value gain was recognised on the conversion of $3.25m of convertible notes and accrued interest into equity in November 2025.
8. Finance costs reduced 46% as Group borrowings fell from $2.5m to $0.6m over the year.

Note: For a detailed group statutory Profit and Loss (including discontinued operations in the prior period), refer to the Appendix 4E & FY26 Annual Report

Balance Sheet

A materially strengthened balance sheet supports the Group's continued transition toward sustained cash generation.

BALANCE SHEET – 30 JUNE Y/E ($000)		FY26	FY25	% VAR
Cash and cash equivalents		1,622	1,890	(14%)
Trade and other receivables		450	366	23%
Contract assets		6	11	(45%)
Inventories		233	263	(11%)
Income tax receivable		565	596	(5%)
Prepayments		113	131	(14%)
Total current assets	2	**2,991**	**3,257**	**(8%)**
Property, plant and equipment		89	133	(33%)
Intangibles		12	5	166%
Total non-current assets		**102**	**137**	**(26%)**
Total assets		**3,093**	**3,394**	**(9%)**
Trade and other payables	3	856	1,410	(39%)
Contract liabilities (current)		1,427	1,126	27%
Borrowings (current)		428	974	(56%)
Employee benefits (current)		151	171	(12%)
Total current liabilities		**2,863**	**3,682**	**(22%)**
Contract liabilities (non-current)		67	20	234%
Borrowings (non-current)	4 5	150	1,500	(90%)
Employee benefits (non-current)		28	15	82%
Total non-current liabilities		**245**	**1,535**	**(84%)**
Total liabilities		**3,107**	**5,217**	**(40%)**
Net assets/(liabilities)	1	**(15)**	**(1,823)**	**(99%)**

1. Net liabilities reduced from $1.8m to $0.015m over the year, following the conversion of $3.25m of convertible notes into equity and improved trading results.

2. Total current assets of $3.0m provide continued working capital support as the business builds toward sustained cash generation.

3. Trade and other payables reduced 39%, reflecting tighter working capital management.

4. Borrowings reduced from $2.5m to $0.6m over the year, following the conversion of convertible notes to equity and improved trading results. The current ratio improved from 88% to 104%, reflecting a stronger liquidity position following the balance sheet initiatives completed during the year.

5. In July 2026 (subsequent to year end), the Group repaid a further $75,000 of the Adcock Private Equity Debt Facility Agreement shown in non-current borrowings as at 30 June 2026.

Cash Flow Statement

Operating cash flow turned positive in 2H FY26, with long term stability supported by recurring software revenue.

CASH FLOW STATEMENT – 30 JUNE Y/E ($000)		FY26	FY25	% VAR
Receipts from customers	2	4,894	4,543	8%
Payments to suppliers and employees	3	(6,710)	(7,720)	(13%)
Interest and other finance costs paid		(12)	(467)	(97%)
Research and development tax credit received	4	569	480	19%
Net cash used in operating activities	1	**(1,259)**	**(3,164)**	**(60%)**
Payments for property, plant and equipment		(6)	(28)	(80%)
Payments for intangibles		(10)	(1)	802%
Net cash used in investing activities		**(16)**	**(30)**	**(47%)**
Net proceeds from issue of shares		(88)	2,422	n/m
Net proceeds from short term finance facility		14	-	n/m
Proceeds from convertible notes facility	5	690	1,500	(54%)
Proceeds from R&D facility	6	400	-	n/m
Net cash from financing activities		**1,016**	**3,922**	**(74%)**
Effect of movement in exchange rates on cash held		(8)	–	n/m
Net increase/(decrease) in cash and cash equivalents		**(267)**	**729**	**(137%)**
Cash and cash equivalents at the beginning of the year		1,890	1,161	63%
Cash and cash equivalents at the end of the year	7	**1,622**	**1,890**	**(14%)**

1. Positive operating cash flow was achieved in 2H FY26, the first positive half-year operating cash flow as a Group; full year net operating cash outflow improved by 60% to $1.3m (FY25: $3.2m), a $1.9m improvement.
2. Customer cash receipts grew 8% to $4.9m, ahead of revenue growth, reflecting improved collections discipline.
3. Payments to suppliers and employees reduced 13%, reflecting the February 2026 workforce restructuring and ongoing cost discipline.
4. R&D tax credit received increased to $0.6m, continuing to support investment in eligible development activities.
5. $0.69m was drawn under convertible note facilities during the year, down from $1.5m in FY25, as reliance on external funding reduced.
6. In April 2026, the Company established a $0.6 million R&D funding facility, with $0.4 million drawn at 30 June 2026 and repayable from the FY2026 R&D Tax Incentive.
7. Cash and cash equivalents closed the year at $1.6m (FY25: $1.9m); the Group's priority for FY27 is to sustain the positive operating cash flow achieved in the second half.

Visionflex Group

FY27 Outlook

Outlook – FY27 & Beyond

We enter FY27 with a materially lower cost base, improved cash generation and a growing pipeline of enterprise opportunities. Our priorities are to:

1. Grow recurring revenue within the installed base, expanding site counts with existing enterprise customers and converting deployed hardware into subscription and support arrangements
2. Convert the enterprise pipeline built through FY26 into executed contracts across aged care, Aboriginal community controlled health, public health, resources and defence, and extend international reach through channel partners in New Zealand and the United States
3. Scale the unattended access capability from its first deployment with RFDS SA/NT into additional remote, resources and after-hours aged care settings, where the absence of an on-site operator has limited virtual care to date
4. Deepen integration of the Visionflex platform with customers' clinical and patient record systems, and progress technical partnerships that embed the platform within larger virtual care programmes in Australia and the United States
5. Maintain the cost discipline and operating cash generation achieved in the second half of FY26.

Important notices

This results presentation (Presentation) has been prepared by Visionflex Group Limited ACN 138 897 533 (ASX:VFX) **(Company)** and is dated 28 August 2026.

Acceptance

The information in this Presentation remains subject to change without notice. By accepting this Presentation, you agree to be bound by the following limitations and conditions.

Summary information

This Presentation contains summary information about the Company, its subsidiaries and their activities which is current as at the date of this Presentation (unless otherwise noted) and the information in this Presentation remains subject to change without notice. The information in this Presentation is of a general nature and does not purport to be complete nor does it contain all the information which a prospective investor may require in evaluating a possible investment in the Company or that would be required in a prospectus or product disclosure statement prepared in accordance with the requirements of the *Corporations Act 2001 (Cth) or the securities laws of any other jurisdiction.*

This Presentation should be read in conjunction with the Company's other periodic and continuous disclosure announcements lodged on the Australian Securities Exchange (ASX) which are available at www.asx.com.au or www.vfx-group.com

Not an offer

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In this Presentation, all dollar values are in Australian dollars (A$), unless otherwise stated.

A number of figures, amounts, percentages, estimates, calculations of values and fractions in this Presentation are subject to the effect of rounding. Accordingly, the actual calculations of these figures may differ from the figures set out in this Presentation.

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