

INCORPORATION INSTRUCTIONS

PERSONAL DETAILS

FULL NAME(S):

ADDRESS & PHONE NO:

CORPORATE NAME

NUMBERED CORPORATION:

YES: _____

NO: _____

OR

NAMED CORPORATION:

YES: _____

NO: _____

IF YES TO NAMED:

PROPOSED NAME:

SHAREHOLDERS

NAME(S):

% OF OWNERSHIP:

DIRECTORS

NAME(S):

OFFICERS

PRESIDENT: _____

SECRETARY: _____

TREASURER: _____

REGISTERED OFFICE:

ADDRESS: _____

QUESTIONS/COMMENTS

Please complete and return to:

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