

Use another form(s) if insufficient space for all information on one form

PROPOSED COMPANY NAME:

1.
2.
3.

CONTACTS:

Name	Address	Phone	
		Fax	
		Email	
		Phone	
		Fax	
		Email	

CONFIDENTIALITY: Any restriction on
LAW PARTNERS
contacting the above named

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COMPANY ACTIVITIES / SECTOR:

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CAPITAL

VALUE

currency and amount

NUMBER OF SHARES

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CLASS

e.g. ordinary

SHAREHOLDERS :
At least one.

Note: If the natural person beneficial owner(s) are different to the shareholders please provide details separately

Full Name	Address	Nationality	Gender	Number of Shares

TOTAL SHARES TO BE ISSUED

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VANUATU LOCAL COMPANY INCORPORATION / ACQUISITION DETAILS

DIRECTORS:

At least one.

Note: a company may be a director. At least one director must be a natural person

Full Name	Address	Nationality	Occupation

REGISTERED OFFICE:

CONFIRM REGISTERED OFFICE TO BE LOCATED AT LAW PARTNERS OFFICES

YES

NO

BALANCE DATE:

PROMOTERS AGREEMENT:

THE UNDERSIGNED, AS PROMOTERS OF THE COMPANY TO BE FORMED, AGREE TO SIGN A PROMOTERS INDEMNITY AND PAY ALL FEES AND OUT OF POCKET EXPENSES DUE TO LAW PARTNERS IN RESPECT OF THE INCORPORATION OF THE COMPANY

PROMOTERS:

WITNESS:

DATE:

OTHER SERVICES REQUIRED OF LAW PARTNERS:

VAT

Accounting / Payroll

Audit

LAW PARTNERS ADDRESS:

LAW PARTNERS
P O Box 212, Port Vila,
Vanuatu

Phone: (678) 22091

Fax (678) 23665

Email: mail@lawpartnersvanuatu.com