IBC APPLICATION FORM

1.	NAME OF COMPANY TO BE REGISTERED: (Please give an alternative choice)				
a)				,	
b)					
	Note: Name must end with Inc., Corp., Ltd.			•	
2.	MEMORANDUM AND ARTICLES OF ASSOCIATION:				
a)	are suitable for most types of business activi	ty. The Compa	um and Articles of Association will be provided which pany will be incorporated with an authorised share par value issuable in either registered or bearer form.		
	Do you require these standard provisions?		[] Yes [] No		
b)		of shares (inclu	andard provisions including currency and amount of cluding voting, dividend and capital repayment rights), any restrictions on the issue of shares.		
3.	Please state purpose for which company will be used:				
4.	. SHARE CERTIFICATES:				
	BOSL will prepare up to five share certificates, which can be issued in either registered or bearer form. If bearer shares are requested, the certificate(s) will be held in Trust by BOSL as Registered Agent. In either case, please state name(s) and address(es) of proposed shareholder(s) and provide a notarised photo ID for each person. Please specify type of shares and, if necessary, use a separate sheet for additional shareholders.				
	Registered Shares [] Bearer Shares	O	No Shares []		
	1st Shareholder:		2nd Shareholder:		
	Address:		Address:		
	No. of shares:		No. of shares:		

5. REGISTERED AGENT / OFFICE:	6. FIRST DIRECTORS:
The Registered Agent and Registered Office of the Company will be:	Would you like BOSL Corporate Services Limited to act as Nominee Director?
Belize Offshore Services Limited No. 1 Orchid Garden Street Belmopan Belize	[] Yes [] No If not, please give full names of proposed
	Director(s) and provide a notarised photo ID.
7. BANK / BROKERAGE ACCOUNTS:	a)
BOSL can assist with the establishment of bank and and brokerage accounts for the Company. Please state	b)
if you would like BOSL to assist in this process.	
[] Bank Account [] Brokerage Account	8. AUTHORISED AGENT: If BOSL Corporate Services Limited is to act as
9. FEES:	Nominee Director, please state full name and address and provide a notarised photo ID for the person who will act as Authorised Agent:
Formation:	
Government Registration:	Name:
Registered Agent/Office:	Address:
Nominee Director:	
Nominee Shareholder:	
Authorised Agent:	10. APPLICANT:
Apostille:	Name:
Bank or Brokerage Accounts:	Address:
Office Services:	
Courier:	Tel:
TOTAL FEES DUE: US\$	Fax:
	E-mail:
For BOSL Use Only: BOSL Ref: Code:	Date:
DODLICI. COUE.	Signature: