

## NEVIS BUSINESS CORPORATION ORDER FORM

The following information is required to incorporate and structure a company. This information remains confidential under Nevis law. Directors and shareholders information is not filed with the Registrar of Companies.

### 1. Company Name

Please supply a choice of three names in order of preference. Company names must include a suffix such as "Limited", "Corporation", "Incorporated", "Society Anonyme" or "Sociedad Anonima" or "Aktiengesellschaft" or the abbreviations "Ltd.", "Corp.", "Inc." or "S.A." or "A.S." or "A.G."

If you have already reserved a name with us, please indicate it here and tick this box.


### 2. Purpose of the company and the Accounting Address

Please explain the principal activities planned for the new company, such as type of business and product or service to be offered:

--

The address where the accounting records will be kept:

--

### 3. Countries of Operation

Please specify geographic areas where activity will be carried out.

--

Please specify geographic areas of potential clientele

--

### 4. Authorized Capital

Our standard authorized capital is USD 100,000 with shares of USD 1 par value.

Please tick the box to confirm standard capital

---

**AAA GLOBAL INCORPORATION AND TRUST INC.**

- A Hamilton Reserve Bank Affiliate -

Hamilton Reserve Bank Plaza, Building #1, Suite 102, PO Box 590, Nevis, Saint Kitts and Nevis

Telephone: +1 (869) 469-5500 | [www.trustaaa.com](http://www.trustaaa.com)

*WORLDWIDE INCORPORATION AND TRUST SERVICES SINCE 1994*

If you prefer a different capital, for which an extra fee may be payable, please enter it here:

Currency:

Amount:

Number of shares:

## 5. Source of Wealth

Please indicate all sources of wealth of the Beneficial Owner(s) and specify the source of funds for the transaction **(proof of source of funds is to be provided)**

## 6. Directors

Please tick here if you would like agent to provide director service.

Otherwise please enter details of directors here **if different from Beneficial Owner(s)**:

### DIRECTOR 1

Name:

### DIRECTOR 2

Name:

**NOTE:** Director can be a natural or corporate person. Min one director required.

All Directors must provide completed KYC form along with requested due diligence documents.

## 7. Managing Director (optional)

Please tick here if you would like agent to provide Managing Director service.

Otherwise please enter details of the Managing Director here.

Name:

**NOTE:** Managing Director can be a natural or corporate person. The Managing Directors must provide completed KYC form along with requested due diligence documents.

## 8. Secretary (optional)

Please tick here if you would like agent to provide Secretary service.

Otherwise please enter details of the Secretary here:

Name:

**NOTE:** Secretary can be a natural or corporate person. Director, Secretary and Managing Director can be the same person if necessary. The Secretary must provide completed KYC form along with requested due diligence documents.

## 9. By-laws

Our standard by-laws are available on request. If you would like to amend these by-laws, please attach details and tick here.

## 10. Shareholders

Please tick here if you would like agent to provide a trustee service.

Otherwise please enter details of Shareholder(s) here **if different from Beneficial Owner(s)**:

### SHAREHOLDER 1

Name:

Percentage of shareholding:

### SHAREHOLDER 2

Name:

Percentage of shareholding:

**NOTE:** *Shareholder can be a natural person or corporate person. All Shareholders must provide completed KYC form along with requested due diligence documents.*

## 11. Beneficial Owners

Name:

Percentage of ownership:

Name:

Percentage of ownership:

**NOTE:** *All Beneficial Owners must provide completed KYC form along with requested due diligence documents.*

## 12. AAA GLOBAL INCORPORATION and TRUST Professional Client Contact Details

This is the person who is legally responsible for contracting our services to form the proposed new company. We will communicate using the contact information below for all matters relating to the new company, including billing of annual renewal fees. Please be sure to let us know of any changes to this information in the future.

Name:

Company/Firm (if applicable):

Address:

Contact Phone Number:

E-mail:

### 13. Delivery (if differs)

Name:

Company/Firm (if applicable):

Address (including Postal Code):

Contact Phone Number:

### 14. Terms and Conditions/ Declaration

I/we, the person giving these instructions and identified at part 11 of this form, hereby declare and certify that all the information given herein, including in documents attached to or enclosed with this form, is true, complete, and correct. In consideration of agent agreeing to provide its incorporation services I/we (both in my capacity as an individual and on behalf of the entity I am representing, if applicable) do hereby indemnify agent, its subsidiaries, associated companies, directors, officers, trustees, employees and agents against any and all liability that may arise to them as a result of the information provided herein being false, misleading, incomplete or substantially untrue.

We further agree that this contract shall be interpreted exclusively according to the laws of Nevis and we submit to the exclusive jurisdiction of the courts of Nevis in this regard.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Name: \_\_\_\_\_