



AFM Services Group

**AFM SERVICES GROUP
INTERNATIONAL**

ORDER FORM

JURISDICTION

- | | |
|-------------------------------------|--|
| <input type="checkbox"/> Seychelles | <input type="checkbox"/> Mauritius (GBC 2) |
| <input type="checkbox"/> BVI | <input type="checkbox"/> Hong Kong |
| <input type="checkbox"/> Anguilla | <input type="checkbox"/> Nevis |

COMPANY NAME

Kindly Propose 3 IBC names in order of preference:

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-
-

ACTIVITIES

- Use standard wording of Company activities.
 Use specific wording of Company activities, as specified below:

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SHARE CAPITAL

- Register standard authorized share capital.
 Register other amount of authorized share capital:
 \$..... divided into.....shares of\$.....each
 Register no-par-value capital divided into.....shares.

SHAREHOLDERS

Please indicate type of shareholder(s) to be appointed:

- Nominee Shareholder Individual
 Nominee Shareholder Corporate
 Bearer
 Issue/ transfer shares to the following shareholder(s):



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No of Shares

Full Name

Address

Nationality

Reg. Number (Only if corporate body)

If there is more than one shareholder, please copy the data fields from above to indicate full information for each shareholder.

DIRECTORS

Please indicate type of director(s) to be appointed:

- Nominee Director Individual
- Nominee Director Corporate
- Appoint the following as Director(s).

Full Name

Address

Nationality

Reg. Number (Only if Corporate body)

If there is more than one director, please copy the data fields from above to indicate full information for each shareholder.

POWERS OF ATTORNEY

No. of Power of Attorney

Full Name

Nationality

Personal ID Number

Passport number

If there is more than one person to be appointed, please copy the data fields from above to indicate full information for each person to be appointed.

LEGALISATION OF DOCUMENTS

Please provide the following additional legalization for the Company documents:

- Original Certificate of Incorporation by Apostille
- Set of Certified copies of primary documents by Notary and Apostille
- Power(s) of Attorney by Notary Apostille
- Other by Notary by Apostille



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CORPORATE SEAL

NB: Mandatory for BVI and Anguilla IBC

- YES
- NO

BANK INTRODUCTION

Bramer Bank Corporation - recommendable for fast account opening previously known as SOUTH EAST ASIAN BANK based in Mauritius
(no initial deposit required, debit card available—EUR& GBP Accounts Only)

OR

BELIZE BANK (requires minimum deposit \$US\$ 1,000, internet banking and debit card also available inclusive of gold card)

OR

HSBC HONG KONG (initial deposit for both type of accounts require US\$ 650 as a first time deposit once account opened)

OR

Hang Seng Bank Limited - Hong Kong (requires minimum deposit US \$1,300, internet banking credit card facility) Deposit of us\$ 10,000 for activation of visa card. Funds may be withdrawn once card activated.

OR

Standard Chartered Bank Hong Kong initial deposit of HKD 10,000 (US\$ 1,300) in order to activate bank a/c and internet banking



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OR

Barclays Bank Seychelles (initial deposits of US\$ 500 required, Internet Banking, Debit Card)

OR

BMI Offshore Bank (requires minimum deposit US\$ 5000, internet banking and debit card also available)

Currency of bank account:

EUR

Sterling

US\$

Other

Internet Banking

International Debit Card

OTHER INSTRUCTIONS/REQUIREMENTS

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.....
.....
.....

DELIVERY

Please note that deliveries by courier cannot be made to PO boxes. To order delivery by courier, a contact person and a telephone needs to be indicated.

Type of delivery:

by courier (STRONGLY RECOMMENDED)

by registered snail mail

to CLIENT as indicated in the next chapter

to the following recipient

Name in Full



AFM Services Group

Residential address

Contact Telephone

PREFERRED FORM OF PAYMENT (via bank transfer or by Credit Card).

US\$

EUR

GBP

CLIENT

This information is only for our internal file and will be kept confidential at all times, subject to the applicable laws. This information is NOT part of any public record. We will consider the person(s) indicated in this field to be our client(s) and the beneficial owner(s) of the company hereby ordered. We will not take any further instructions in regards of this company from any other persons except the one(s) not take any further instructions in regards of this company from any other persons except the ones indicated here.

Full Name

Residential address

Telephone

Fax

Email

Signature



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REQUIREMENTS

1. A notarized copy of your passport
2. Bank reference letter with whom relevant person has banking relationship with for at least 2 years.
3. Professional (Attorney/ Accountant) reference letter with whom relevant person has had professional relationship for at least 2 years.
4. Copy of utility bill showing place of residence

Return to: A.F.M SERVICES GROUP.

P. O. Box 281

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Basseterre, St. Kitts, West Indies

Tel: 1-869-465-4459, Fax: 1-869-465-5983

Email: afms@sisterisles.kn