

CUSTOMER INFORMATION

	Last Name: _____
	First Name: _____
	Middle Name: _____
	Identification Type and No: _____

CORPORATION INFORMATION

Corporate Access No. _____	For Year Ending: _____
Name of Corporation: _____	Address: _____
Date of Incorporation, Continuation, Amalgamation or Registration: _____ YYYY / MM / DD	_____

Has there been any change of directors? YES NO
 If Yes, have Corporate Registry Records been updated? YES NO If No, attach the update to this form.

SHAREHOLDER INFORMATION

CHANGES IN SHAREHOLDERS

Name and Address _____ % of voting shares <input type="checkbox"/> Corporate Access Number _____	Name and Address _____ % of voting shares <input type="checkbox"/> Corporate Access Number _____
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