

1.0 - ABOUT THE PROPOSED COMPANY

Please provide the name of the country and/or the jurisdiction of incorporation (e.g. Panama, Nevis, Seychelles, Belize etc.) and type of Company (IBC, CSL, LLC, LTD, etc.)

Country of Incorporation and Company Type: _____

This is a New Formation Continuation/Redomicile Transfer of Administration

1.1 - PROPOSED COMPANY NAME

Please provide a list of company names for the proposed company unless you have already reserved a pre incorporated company. Please also provide the required suffix to denote Limited Liability status. Refer to the jurisdiction information for available suffixes.

First Choice _____ Suffix: _____

Second Choice _____ Suffix: _____

Third Choice _____ Suffix: _____

Have you selected this company name from our list of pre incorporated Companies Yes No

1.2 - MEMORANDUM AND ARTICLES OF ASSOCIATION (or "organization" for LLCs)

All pre-incorporated ("shelf") companies are established with a standard template constitutional documents. If any special provisions are required, please indicate below or in the Notes section at the end.

1.3 - SHARE CAPITAL AND CLASSES

All pre-incorporated ("shelf") companies are incorporated with a share capital. Subject to the jurisdiction the authorised capital is set at the highest limit which attracts the lowest initial and subsequent license fees. (E.g. Panama US\$10,000) Please refer to the jurisdiction information. If you require a specific share capital and/or different classes of shares please provide full details below or on the Notes section at the end.

1.4 - PURPOSE OF COMPANY (Tick the appropriate box)

- Investment Holding
- Trading in Goods/Services
- Consultancy
- Property Investment
- Expatriate Salary
- Other please specify

To assess your application, we need detailed information about what the company will be used for. Please list activities, goods to be traded, trading parties if known, nature of investments and services to be provided. **PLEASE ATTACH A BUSINESS PLAN IF AVAILABLE (may be required for certain banks if providing assistance with opening of a bank account).**

1.5 – COMPANY STRUCTURE

If this Company is to be part of a Corporate Structure i.e. it will either own/part own other companies or be owned/part owned by other corporate entities please provide details to include where they are incorporated, where they are based and what their purpose is within the overall structure. **IF THERE ARE NO OTHER CORPORATE ENTITIES PLEASE PROCEED TO 1.6.**

1.6 - GEOGRAPHY OF PROPOSED BUSINESS

Please list all countries where the company will be trading/investing as well as addresses from which it will be operating.

1.7 - HOW WILL THE COMPANY BE FUNDED?

To comply with our statutory duties we must know how the company will be initially and subsequently funded. Please describe the source of funds that will be used to finance the Company in the space below. Documentation **must** be attached to support this application. Example: if using a loan, a copy of the loan agreement is required, if utilising personal funds, please provide a brief description of the source (account name, bank name/location, etc.)

1.8 - ABOUT THE TURNOVER, PROFIT AND TRANSACTIONS OF THE COMPANY

How much start up capital will be invested into the business?	*	_____
Estimated annual turnover	*	_____
What is the anticipated annual profit?	*	_____
Estimated number of transfers into the company's bank account per month	*	_____
Estimated value of transfers into the company's bank account per month	*	_____
Estimated number of transfers out of the company's bank account per month	*	_____
Estimated value of transfers out of the company's bank account per month	*	_____

* Please indicate the currency quoted in full

Any other pertinent Information:

2.0 - COMPANY MANAGEMENT AND OWNERSHIP STRUCTURE

Would you like MrInternational.xyz to arrange for the appointment of Professional Directors/ Managers to this company?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Would you like MrInternational.xyz to provide a Company Secretary to this company (Note: where we are either providing professional directors and/or where it is a requirement in the jurisdiction, we will appoint a Secretary automatically)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Would you like MrInternational.xyz to provide Nominee Shareholders/Members for this company?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Would you like MrInternational.xyz to assist in the establishment of a Trust, Foundation or a 2nd Company to own this company?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

If yes above, please indicate which is preferred and desired jurisdiction:

2.1 - OWNERS, SHAREHOLDERS, DIRECTORS AND OTHER CONNECTED PERSONS OR LEGAL ENTITIES

Please provide details of who will be the beneficial owner(s), shareholder(s), director(s), manager(s) or members of the Company. If MrInternational.xyz is not providing professional directors or managers we will require detailed information about the proposed directors/managers after stating the connected persons and/or legal entities below. Please complete a page in Section 3 for each person or legal entity who is to be connected to the company.

Names of Individuals or Legal Entities	Please cross the appropriate boxes			
	Director / Manager	Beneficial Owner	Nominee Services	Number of Shares to Issue
Example: Mr John Smith	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	1
(1)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
(2)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
(3)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
(4)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
(5)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
(6)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

2.2 - BOOKS, REGISTERS AND RECORDS (skip to 3.0 if we are providing a company secretary)

Where a Company Secretary is appointed, we must maintain the originals of all registers (assets, charges, directors/managers and shareholders/members), minutes of meetings, resolutions and accounts (where applicable). Otherwise, please indicate who will maintain the originals of the following records:

Item	To be maintained by	
	MrInternational.xyz	Intermediary
Register of Shareholders/Members and Directors/Manager:	<input type="checkbox"/>	<input type="checkbox"/>
Resolutions and Minute Book:	<input type="checkbox"/>	<input type="checkbox"/>
Register of Charges:	<input type="checkbox"/>	<input type="checkbox"/>

Please complete this page for every person or legal entity who/ that is described in section 2.1. If a **legal entity** is connected to the company please fill in sections 3.2, 3.3 and 3.4 only. Two pages provided. Please copy if necessary.

3.0 – PERSONAL INFORMATION ABOUT THE CONNECTED PERSON

Title (e.g. Mr, Mrs, Dr): _____ Family Name: _____
First and Other Names: _____ Former names: _____
Occupation: _____ Languages: _____
Passport Number: _____ Date of Birth: _____
Nationality: _____ Place of Birth: _____

3.1 – USUAL RESIDENTIAL ADDRESS AND CONTACT DETAILS

Address: _____

City: _____ State/Region: _____
Post Code/Zip Code: _____ Country: _____
Home Telephone: _____ Home Email: _____
Home Fax: _____ Personal Mobile: _____

3.2 – OFFICE ADDRESS AND CONTACT DETAILS - FOR PERSONS AND LEGAL ENTITIES

Company Name: _____ Country of Incorporation: _____
Contact Person: _____ Incorporation No: _____
Address: _____

City: _____ State/Region: _____
Post Code/Zip Code: _____ Country: _____
Office Telephone: _____ Office Mobile: _____
Office Fax: _____ Office Email: _____

3.3 - PREFERRED METHOD OF CONTACT – Please indicate by ticking a box

Home Telephone: Home Mobile: Home Fax: Home Email : Home Mail: Home Courier:
Office Telephone: Office Mobile: Office Fax: Office Email : Office Mail: Office Courier:
SPECIAL INSTRUCTIONS: _____

3.4 – CONNECTION TO THE COMPANY – Please indicate by ticking the boxes or completing as necessary

Contact Person Managing Agent Intermediary
 Director/Appointed Manager Company Secretary An Existing Client
 Beneficial Owner/Shareholder, please state percentage ownership : _____
 Other please specify: _____

3.5 – SOURCE OF WEALTH

If you are a beneficial owner/principal, please provide a brief description as to the origin of the funds to be introduced to the company.

4.0 DOCUMENT SERVICES

Please indicate if below if you require any additional documentation or legalised copies in addition to those provided with our "Standard Services". Please note that additional fees apply for the following services. If we are providing a banking introduction, we will indicate which services are necessary and advise of the additional fees prior to finalizing the invoice.

Document	Certified (Reg. Agent)	Notarised	Apostilled	N&A in Jurisdiction	Legalised at an Embassy	No. of Copies
Certificate Of Incorporation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Memorandum & Articles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Certificate of Incumbency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Cert. of Good Standing/Fact	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Appointment of Directors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

If legalised documents are required please state country:

Other important requirements:

4.1 - CORPORATE BANK ACCOUNT INTRODUCTION

If you require assistance with Bank Account Opening please indicate your preference below?

Type of Account/s	<input type="checkbox"/> Current/ Checking	<input type="checkbox"/> Call Deposit	<input type="checkbox"/> Fixed Deposit
Signatory (1)	Signatory (2)		
Signatory (3)	Signatory (4)		
Signing:	<input type="checkbox"/> Singly	<input type="checkbox"/> Any Two	<input type="checkbox"/> All
	<input type="checkbox"/> Other:		
Preferred Bank Jurisdiction?			
MrInternational.xyz to recommend a suitable Bank?	<input type="checkbox"/> Yes		<input type="checkbox"/> No (indicate below)
Bank Name	Branch		

4.2 VIRTUAL OFFICE SERVICES

Please indicate the service required by ticking the appropriate box (Panama, London, Singapore, Hong Kong).

Description of Service	Location of service.	
Combined Virtual Office Services		<input type="checkbox"/>
Mail handling & forwarding		<input type="checkbox"/>
Telephone Answering and call forwarding		<input type="checkbox"/>
Facsimile handling and forwarding		<input type="checkbox"/>
Email		<input type="checkbox"/>

Please indicate any special requirements (Direct DID telephone number and call rerouting to another country, etc.) here or in the Notes at the end.

4.3 ADDITIONAL SERVICES

- Opening of Personal bank accounts
- Yacht registration and management services
- "Cash Management Account"
- Loadable "No-Name" Mastercard or Visa
- Company credit card services (bank issued)
- Internet Merchant Account (for accepting Visa, MC, etc.)

Please state any other services you may require:

5.0 – COMPANY DOCUMENTS

- Hold documents in safe custody: (mandatory if providing Director/Manager services; otherwise, optional)
- Send documents to mailing address of: _____
- Send documents to the following person (include name of recipient, address and post code):
