

Certified Public Accountants with more than 40 years of experience.

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PLEASE COMPLETE THE FOLLOWING INFORMATION REQUEST

COMPANY INFORMATION COMPANY NAME ADDRESS CITY / STATE / ZIP PRESIDENT'S NAME TELEPHONE () EMAIL

ALL OFFICERS / MANAGERS / MEMBERS

NAME	NAME
TITLE	TITLE
NAME	NAME
TITLE	TITLE
NAME	NAME
TITLE	TITLE



SHAREHOLDERS / MEMBERS

NAME	NAME	
SSN	SSN	
PASSPORT NUMBER	PASSPORT NUMBER	
ADDRESS	ADDRESS	
PERCENTAGE OWNERSHIP%	PERCENTAGE OWNERSHIP%_	
NAME	NAME	
SSN	SSN	
PASSPORT NUMBER	PASSPORT NUMBER	
ADDRESS	ADDRESS	
PERCENTAGE OWNERSHIP%_	PERCENTAGE OWNERSHIP%_	
NAME	NAME	
SSN	SSN	
PASSPORT NUMBER	PASSPORT NUMBER	
ADDRESS	ADDRESS	
PERCENTAGE OWNERSHIP%	PERCENTAGE OWNERSHIP%_	
NOTE OF INTEREST		
Would you like for us to serve as the corporation's Registered Agent? YES NO		
Keeping yearly up-to-date corporate minutes is required to preserve your liability protection, tax advantage, and other corporate benefits. Would you like for us to help you mantain corporate minutes? YES NO		