

# Order a Company



Name and Address of Firm      Tax Accounting Adelaide  
 Telephone                      0883374460  
 Facsimile                        0883659573  
 fee                                 \$990                      additonal fee of \$55 for ABN

|   |   |   |                           |                        |                     |                          |
|---|---|---|---------------------------|------------------------|---------------------|--------------------------|
| <b>Name and Address of Firm</b>   | <b>Telephone</b>  | <b>COMPANY NAME</b> (Is it a registered Business Name Yes/No)<br>If Yes, Business Registration Number _____ |                           |                        |                     |                          |
| <b>Contact Name</b>   | <b>Facsimile</b>  |   |                           |                        |                     | <b>ACN</b>               |
| <b>Email Address</b>  | <b>State of Incorporation</b><br>SA VIC NSW QLD WA NT TAS ACT | <b>Type of Company –Shelf</b> _____   | <b>Documents Dated</b>    |                        |                     |                          |
|   | <b>Special Instructions</b>                                   | <b>Incorporation Date</b>   |                           |                        |                     |                          |
| <b>Full Name</b>  | <b>Residential Address</b>                                    | <b>Date &amp; Place of Birth</b>  | <b>Occupation</b>         |                        |                     |                          |
| <b>Directors</b> (Must be 18 years or older)  |   |   |                           |                        |                     |                          |
| <b>Secretaries</b> (Must be 18 years or older)  |   |   |                           |                        |                     |                          |
| <b>Public Officer</b> (Must be 18 years or older)   |   |   |                           |                        |                     |                          |
| <b>Members – Full Name</b><br>(Must be 18 years or older or Held in Trust by a person 18 Years or older or a Company)   | <b>Residential Address</b>                                    | <i>Issue value per share will be \$1.00 unless otherwise stated</i>   |                           |                        |                     |                          |
|   |   | <b>Total Shares Held</b>  | <b>Total Value</b>        | <b>Class of Shares</b> | <b>No of Shares</b> | <b>Serial No From To</b> |
|   |   |   |                           |                        |                     |                          |
| <input type="checkbox"/> To Incorporation Specialists Pty Ltd: I/We confirm that all the above mentioned proposed directors, secretaries and members have consented to their appointments under section 117(5) of the Corporations Act 2001 and hereby appoint Incorporation Specialists Pty Ltd to sign the Application for Registration of this company as agent. |   |   |                           |                        |                     |                          |
| <b>Registered Office</b>  |   |   |                           |                        |                     |                          |
| <b>Principal Place of Business</b>  |   |   | <b>Nature of Business</b> |                        |                     |                          |

Please note a common seal will only be supplied when requested for an additional \$44.