

To: Shelcom Corporate Services
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INSTRUCTIONS REGARDING PUBLIC COMPANY ACQUISITION – LIMITED BY SHARES

From: Name _____
Company _____
Address _____
Phone No. _____ Fax No. _____
Signature _____ Email _____

By signing this order form, I accept, on behalf of my firm, full liability for the payment of the invoice relating to this order. Shelcom Corporate Services Australia Pty Ltd will not accept transfer of this liability to a third party.

COMPANY NAME 1st Pref _____

COMPANY NAME 2nd Pref _____

IS THE COMPANY NAME BEING APPLIED FOR A CURRENT REGISTERED BUSINESS IN THE DIRECTORS NAMES

BUSINESS REGISTRATION NO. _____

REGISTERED OFFICE _____

BUSINESS ADDRESS _____

SUPERANNUATION TRUSTEE ONLY COMPANY DATE / / NO SEAL FOLD-A- SEAL HAND SEAL

COMPANY FOLDER PREFERENCE: SHELCOM FOLDER MANILLA SPRING TRANSFER FILE

CD CONTAINING PDF VERSION OF CONSTITUTION COMB BINDING HEAT SEAL BINDING

OFFICEHOLDER/SHAREHOLDER DETAILS (If shareholder is a company, please provide registered office & A.C.N.)

(A public company must have at least three directors and at least one secretary. At least two of the directors and one secretary must ordinarily reside in Australia.)

1. Full Name _____
Address _____
Date of Birth / / Town & Country of Birth _____
(tick) Director Secretary Public Officer No of Shares []

2. Full Name _____
Address _____
Date of Birth / / Town & Country of Birth _____
(tick) Director Secretary Public Officer No of Shares []

3. Full Name _____
Address _____
Date of Birth / / Town & Country of Birth _____
(tick) Director Secretary Public Officer No of Shares []

(If you require additional directors/shareholders, please use this form again as a second page.)

CREDIT CARD DETAILS: VISA MASTERCARD BANKCARD AMEX DINERS

Card Number:

Card Holder: _____

Expiry Date: / Card Holders Signature _____

Direct Bank Credit: BSB: 063 303 Account No: 1004 9522 – Please quote invoice no. or company name in comments