Form 14 | Annual return

Section 119, Companies Act 2012

Notes

If there is insufficient space on the form to supply the required information, attach a separate sheet containing the information set out in the prescribed format.

The information on this form must be either typewritten or printed legibly.

Company name number	Company
Date of annual return This must be a date within the month allocated by the Registrar for file.	ing your annual return.
Date (dd/mm/yyyy): / /	
2. Addresses	
There are no changes in addresses (tick this box if applical	ple and skip to item 4).
If there are changes to any addresses, update the information below	·.
a. Address of registered office Note: Must be a physical address in Vanuatu. Must not be either a PO Box or	Private Bag address.
Province or Municipality:	
b. Postal Address The postal address is the same as the registered office address	
OR	
The postal address to which communications from the Registrar n	nay be sent is set out below.
Province:	

Email:	
Lastification.	· · ·

3. Records

Complete if any of the records described in section 113(4) of the Companies Act 2012 are not kept at the company's registered office. Otherwise, go to 4. Directors.

Description of records	Address of place where records kept		

4. Directors

Instructions for completing director information

- 1. If there are <u>more than four</u> existing directors, attach a separate sheet containing the information set out in the prescribed format. All names should be printed in BLOCK letters.
- 2. If there has been a change in directors (appointment or cessation) or a change in the details of an existing director, form 12 must be submitted together with this annual return.
- 3. The following persons are confirmed as the directors of the company as at the date of the annual return:

Note: If there are more than four directors, please attach a separate sheet containing the information set out in the prescribed format.

Full legal name*:
Full legal name*:
Full legal name*:
Full legal name*:

5. Shareholders

Instructions for completing shareholder information

- 1. If there are <u>more than four</u> existing shareholders, attach a separate sheet containing the information set out in the prescribed format. All names should be printed in BLOCK letters.
- 2. If there has been a change in shareholders or a change in the details of an existing shareholder, <u>a form 8, 9, 10, 11</u> or 11A, as relevant, must be submitted together with this annual return.
- 3. The following persons are confirmed as the shareholders of the company as at the date of the annual return:

Note: If there are more than four shareholders, please attach a separate sheet containing the information set out in the prescribed format.

Print first name(s) followed by surname in BLOCK letters.

Full name*:	Class of shares (if relevant):
	Number of shares held in each class.
Full name*:	Class of shares (if relevant):
	Number of shares held in each class:
Full name*:	Class of shares (if relevant):
	Number of shares held in each class:
Full name*:	Class of shares (if relevant):
	Number of shares held in each class:
	A

6. Community Company requirements

If your company is a community company, you must attach a copy of the Community Company report required under section 169 of the Companies Act 2012.

7. Business Sector

Please indicate (circle or underline) the <u>primary</u> sector your company operates in:

- Agriculture, forestry, and fishing
- Mining and quarrying
- Manufacturing
- Electricity, gas, steam, and air conditioning supply
- Water supply; sewerage, waste management, and remediation activities
- Construction
- Wholesale and retail trade; repair of motor vehicles and motorcycles
- Transportation and storage
- Accommodation and food service activities
- Information and communication
- Financial and insurance activities
- Real estate activities
- Professional, scientific, and technical activities
- Administrative and support service activities
- Public administration and defence; compulsory social security
- Education
- Human health and social work activities
- Arts, entertainment, and recreation
- Other service activities
- Activities of households as employers; undifferentiated goods- and services-producing activities of households for own use
- Activities of extraterritorial organizations and bodies

^{*} In the case of a natural person, print first name(s) followed by surname in BLOCK letters.

Telephone:
receptorie.
Email (optional):
uired report.

Form 15 Application for registration of amalgamation proposal Section 136 Companies Act 2012 Note	For office use only Document number
If there is insufficient space on the form to supply the required information, attach a separate sheet containing the information set out in the prescribed format.	Place barcode here
The information on this form must be either typewritten or printed legibly.	
1. Names and registration numbers of companies participat	ing in amalgamation
Name of company number	Registration
Name of company number	Registration
Name of company number	Registration
Name of company number	Registration
Note: If more than four companies are participating in the amalgamation, attach a out in the prescribed format for all such companies. All names should be in BLOCI	a separate sheet containing the information s K letter format.
2. Name of amalgamated company	
	-

3. Date of amalga	mation (if a	pplicable)		
Date (dd/mm/yyyy):		/	/	
proposal. The date r	<u>nust be the do</u> ier than the d	ate this form is submitate of submission of	itted to the Registrar or a la this Form to the Registrar.	to become effective under the amalgamation ater date. Where no date is specified or if the the date the amalgamation is effective will be
4. Addresses for t	he amalgan	nated company		
Address of register Must be a physical addr Vanuatu. Must not be a Private Bag address.	ess in			
		Province or Municipa	lity:	
Postal address Postal address to which communications from the Registrar may be ser	nt (eg PO Box).	Postal address:		
		Province or Municipa	lity:	
		Email address:		
5. Directors The following personamed directors have	ons are the dive consented	irectors of the amal to act in that capac	gamated company. The city.	Applicant attests that all of the following
N ote : If there are <u>mo</u> All names should be in	re than four o n BLOCK lette	<u>lirectors</u> , attach a se _l er format.	parate sheet containing the	information set out in the prescribed format.
Full legal name: Physical address; Postal address; Mobile Phone:			· ·	Registration number (if a registered entity): Email: Gender (if a natural person): Nationalities/jurisdictions:
Full legal name: Physical address: Postal address: Mobile Phone:				Registration number (if a registered entity): Email: Gender (if a natural person): Nationalities/jurisdictions:
Full legal name: Physical address: Postal address: Mobile Phone:				Registration number (if a registered entity): Email: Gender (if a natural person): Nationalities/jurisdictions:

Full legal name; Physical address; Postal address; Mobile Phone;	Registration number (if a registered entity): Finail: Gender (if a natural person). Nationalities/jurisdictions:

6. Shareholders

The following persons are the shareholders of the amalgamated company. The Applicant attests that the person(s) shown as shareholder(s) has consented to act in this capacity.

Instructions for completing shareholder information

- 1. If there are <u>more than three</u> shareholders, attach a separate sheet containing the information set out in the prescribed format. All names should be set out in BLOCK letter format.
- 2. If the shareholder is a natural person, provide their first name followed by their surname. If the shareholder is a registered entity (such as another company), provide the entity name and registration number.
- 3. If shares are jointly held, provide the particulars of each shareholder within a single box below.

s there more than one class of shares for this company?	Yes No
	Total number of shares:
	Nationality/jurisdiction of shareholder:
Number of shares: Name(s) of shareholder(s):	Registration number (if a registered entity): Gender (if a natural person):
	Nationality/jurisdiction of shareholder:
Name(s) of shareholder(s):	Gender (if a natural person):
Number of shares:	Registration number (if a registered entity):

lumber of shares:	Regis	tration number (if a regi	stered entity):
lame(s) of shareholder(s):	Gend	er (if a natural person):	
	Natio	nality/jurisdiction of sha	reholder:
ame:	Signature:		
Print first name(s) followed by surname in BLOCK lette			
1 majust name(s) johowed by surname in BLOCK lette	· 3.		-
esignation: Director Authorised person	Annua III	/	1
	Date (dd/mm/yyyy):	contact details:	
Lodged by	_		
	Other	,	
Name:	_		
Name:	Other		
vame: Address:	Other Telephone:		
Name: Address: Checklist	Other Telephone: Email:		
vame: Address:	Other Telephone: Email:	npany this form:	

(b) a certificate signed by the directors of each amalgamating company stating that the amalgamation has been approved in accordance with this Act and the relevant company's rules; and
(c) a document (Form 15A) signed by each person named in this form as a director of the amalgamated company containing his or her consent to be a director.
The prescribed form

Please deliver documents to Vanuatu Financial Services Commission, Companies House, Rue Bougainville, PMB 9023, Port Vila, Efate, Vanuatu

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Form 15A | Consent and certificate of director of amalgamated company

Section 136 and Schedule 3, Companies Act 2012

Notes

This form is required to be sent to the Registrar of Companies, and must also be held in the company's records and be produced if requested by the Registrar.

The information on this form must be either typewritten or printed legibly.

If there is more than one director, each new director must complete a separate consent and certificate using Form 15A.

Company name						Company number
			en e			
Note: If the name of the an and number. If the amalg number.	malgamated comp amated company	any <u>is the same</u> will have a new	e as that of ai v company na	n existing comp me, provide the	any, provide the c proposed name	existing company's name and name reservation
Director's details						
First name(s):						
Surnaine:				_		
Registration number (if a reg	gistered entity):					
Email:				***		
Gender (if a natural person):						
Nationalities/jurisdictions:						
I consent to act as a dire appointed, or holding or	ffice as, a directo	or of a compa	any.	and certify th	aat I am not disc	qualified from being
Signature:						
Date (dd/mm/yyyy):		/	/			

Please deliver documents to the Registrar of Companies, Companies House, Rue Bougainville, PMB 9023, Port Vila, Efate, Vanuatu

Form 15B Court ordered amalgamation		
Section 136 and Schedule 6 Clause 3, Companies Act 2012	For office use on	š., :
Section 130 and Schedule o clause 3, companies Act 2012	Document number	· ·
	1.XX carrient manuscr	
Note	ş	
If there is insufficient space on the form to supply the required information, attach a separate sheet containing the information set out in the prescribed format.		Place bareode here
The information on this form must be either typewritten or printed legibly.		
Names and registration numbers of companies participation Name of company number	ing in amalgamati	on Registration
	The second secon	
Name of company number		Registration
		Name and the second sec
Name of company		Registration
number		
Name of company number	:	Registration
Note If there are more than four companies participating in the amalgam containing the information set out in the prescribed format for all such conletter format.	ation please attach a s npanies. All names sh	separate sheet ould be in BLOCK
2. Name of amalgamated company		
Name of company		
	-	

3. Date of amalgamation (if a	oplicable)			
Date (dd/mm/yyyy):	/	/		
proposal. The date must be the da	ate this form is substate of submission of mation was received	mitted to the Registr of this Form to the R	amation is to become effective under the amalgamatio t <u>rar</u> or a later date. Where no date is specified or if th Registrar, the <u>date the amalgamation is effective will b</u>	ie
Address of registered office Must be a physical address in Vanuatu. Must not be a PO Box or Private Bag address.				
	Province or Munici	pality:		
Postal address Postal address to which communications from the Registrar may be sent (eg PO Box)	Postal address:			
	Province or Munici	pality:		-
	Email address:			
named directors have consented	to act in that cap irectors, attach a se,	acity.	any. The Applicant attests that all of the following ining the information set out in the prescribed format.	25
Full legal name: Physical address: Postal address. Mobile Phone:			Registration number (if a registered entity): Email: Gender (if a natural person): Nationalities/jurisdictions:	
Full legal name: Physical address: Postal address: Mobile Phone:	-		Registration number (if a registered entity): Email: Gender (if a natural person): Nationalities/jurisdictions:	
Full logal name: Physical address: Postal address: Mobile Phone:	-		Registration number (if a registered entity): Email: Gender (if a natural person): Nationalities/jurisdictions:	

Physical address:	Registration number (if a registered entity): Email: Gender (if a natural person): Nationalities/jurisdictions:

6. Shareholders

The following person(s) are the shareholder(s) of the amalgamated company. The Applicant attests that the person(s) shown as shareholder(s) has consented to act in this capacity.

Instructions for completing shareholder information

- 1. If there are <u>more than three shareholders</u> please attach a separate sheet containing the information set out in the prescribed format. All names should be set out in BLOCK letter format.
- 2. If the shareholder is a natural person, provide their first name followed by their surname. If the shareholder is a registered entity (such as another company), provide the entity name and registration number.
- 3. If shares are jointly held, provide the particulars of each shareholder within a single box below.

Number of shares:	Registration number (if a registered entity):
Name(s) of shareholder(s):	Gender (if a natural person):
	-
	Nationality/jurisdiction of shareholder:
4	
Number of shares:	Registration number (if a registered entity):
Name(s) of shareholder(s):	Gender (if a natural person)
	Nationality/jurisdiction of shareholder:
Number of shares:	Registration number (if a registered entity):
Name(s) of shareholder(s):	Gender (if a natural person);
	AATTITUTATIONALAATTITUTATIONALAATTITUTATIONALAATTITUTATIONALAATTITUTATIONALAATTITUTATIONALAATTITUTATIONALAATTI
	Nationality/jurisdiction of shareholder:

	Total number of shares:
Is there more than one class of shares for this company?	Yes No
$\underline{\text{If yes.}}$ attach a separate sheet that sets out the particulars	of the different classes of shares.
7. Signature and declaration	
I certify that the above companies seek amalgamation and copy of every document submitted with this form is a true	d the information in this form is true and correct, and the and correct copy of the original document.
Signed by proposed director or authorised person of t	he amalgamated company
Name:	Signature:
Print first name(s) followed by surname in BLOCK lette.	rs
Designation: Director Authorised person	Date (dd/mm/yyyy): / /
8. Lodged by	
Name:	Other contact details:
Address:	Telephone:
The following must accompany uns form.	Email:
A certified copy of the court order	
The prescribed fee	
homesed " "	

lacca daliwa d	I							
icase deliver (locuments to Vanuatu F	Port V	'ila, Efate, '	ssion, Con Vanuatu	npanies Ho	use, Rue Boug	ainville, PM	IB 90
	•							
	*							
					~			

Section 140(c) Companies Act 2012

The grounds on which this request is made are:

Form 16 | Request to remove company from the register

Note The information on this form must be either typewritten or printed legibly. There is no fee to submit this form. Company name number 1. Details of request |, being: | a shareholder authorised by special resolution of the above company to make this application; or | a director authorised by the board of the above-named company to make this application; or | a person required or permitted by the rules to make this application— request that the above company be removed from the register.

the Court for an order putting the company into liquidation. 2. Signed by director or authorised person Name: Signature: Print first name(s) followed by surname in BLOCK letters Designation: Director Authorised person Date (dd/mm/yyyy): 3. Lodged by Other contact details: Name: Address Telephone: Email: 61

The company has ceased to carry on business, has discharged in full its liabilities to all its known creditors,

The company has no surplus assets after paying its debts in full or in part, and no creditor has applied to

and has distributed its surplus assets in accordance with its rules and the Companies Act 2012; or

	Checklist ne following documents must accompany this request:
	A copy of the special resolution of shareholders under section 140(c)(i) of the Companies Act 2012.* * Delete if not applicable.
	A copy of the public notice required under section 143(2) Companies Act 2012 that reflects the date of its publication.
	The prescribed fee
P	Please deliver documents to Vanuatu Financial Services Commission, Companies House, Rue Bougainville, PMB 9023, Port Vila, Efate, Vanuatu

Form 17 Application for restoration for failure to File Annual Return Section 150 Companies Act 2012	
Note If there is insufficient space on the form to supply the required information, attach a separate sheet containing the information set out in the prescribed format.	
The information on this form must be either typewritten or printed legibly.	
Company name number	Company
1. Confirmation of removal	
The company has either (i) been removed from the register for the failure to file past due annual section 140(a) of the Companies Act 2012);	returns (pursuant to
Yes No	
OR, (ii) been removed pursuant to section 140(c) following a request by a shareholder, director	or other person.
Yes No	
2. Request for Restoration	
The applicant hereby applies to be restored to the Vanuatu company register.	
Yes No .	
3. Payment of outstanding balances owing	
The company acknowledges that all past annual returns, along with all past due filing fees, late f must accompany this Form in order for the company to be restored.	ees and penalties
Yes No	
4. Signed by director or authorised person	
Name: Signature:	
Print first name(s) followed by surname in BLOCK letters	

Designation: Director 5. Lodged by	Authorised person	Date (dd/mm/yyyy):		/
Name:		Other con	ntact details:	
Address:		Telephone:		
		Email:		

Please deliver documents to Vanuatu Financial Services Commission, Companies House, Rue Bougainville, PMB 9023, Port Vila, Efate, Vanuatu

Notes

Form 18 | Application for registration of overseas company on the Vanuatu register Section 157 Companies Act 2012

If there is insufficient space on the form to supply the required information,

attach a separate sheet containing the information set out in the prescribed format.	
The information on this form must be either typewritten or printed legibly.	
Overseas company name	
1. Country in which company is incorporated	
Addresses Address of place of business or principal place of business of overseas company	
This <u>must</u> be a physical address in Vanuatu and <u>must not</u> be a PO Box or Private Bag address. If the overseas company of business in Vanuatu, provide the address for the principal place of business.	has more than one place
Province or Municipality (e.g., Port Vila):	
Postal address Postal address in Vanuatu to which communications from the Registrar may be sent (eg PO Box).	_
Postal address:	
Province or Municipality (e.g., Port Vila):	
Email address:	
	السا

3. Person(s) authorised to accept service in Vanuatu of documents on behalf of the company

The following person resident (or entity incorporated) in Vanuatu is authorised to accept service in Vanuatu of documents on behalf of the company.

Note: If <u>more than one</u> person is authorised to accept service in Vanuatu, provide information about each such person on a separate sheet attached to this application.

Full legal name: *	Entity type (if	f not individu	al):			
Physical Address (<i>This must b</i> an address in Vanuau): Postal Address:	g.					
Province or Municipality (eg F	Port Vila):					
Directors he following persons are the following persons are the following persons are the followed by surname in	e the directors of the proposed coree directors, attach a separate sheet core. BLOCK letters.	ompany.	nformation	set out in	the prescribed	format. Print first
ull legal name:	And the second s			Registra	ation number (i	f a registered entity):
hysical address:				Email:		
			DAMESTA REPORT OF THE PARTY OF	Gender	(if`a natural pe	rson):
ull legal name:						l'a registered entity):
hysical address:				Email:		
				Gender (if a natural person):		
ill legal name:				Registration number (if a registered entity):		
rysical address:			100	Email:		
ostal address:				Gender (if a natural per	son):
ostal bata cos.				National.	ities/jurisdictio	ns.
~.						
Signed by director or	authorised person	•				
ame:	R :		Signa	ture:		
During Control	The state of the s	• • • • • • • • • • • • • • • • • • • •				
	s) followed by surname in BLOCK letter			ļ		
esignation: Direct	or Authorised person	Date (dd/mm/yy	/y):	/	/
Business Sector				A		
ease indicate (circle or i	anderline) the <u>primary</u> sector you	ur compan	y operates	in:		
- Agriculture, forestr						
Mining and quarryManufacturing	ng					
- Electricity, gas, ste	am and air conditioning supply	1	• •			
- Construction	erage, waste management, and reme	ediation acti	vities			
- Wholesale and reta	il trade; repair of motor vehicles an	d motorcycl	es			
 Transportation and Accommodation ar 	storage ad food service activities					
- Information and co	mmunication					
 Financial and insur Real estate activitie 						
And the state of t	ific and technical activities					

- Administrative and support service activities
- Public administration and defence; compulsory social security
- Education
- Human health and social work activities
- Arts, entertainment and recreation
- Other service activities
- Activities of households as employers; undifferentiated goods- and services-producing activities of households for own use
- Activities of extraterritorial organizations and bodies

Name:	Other contact details:
Address:	Telephone:
	Email:
including a certified translation into English or French Certificate of good standing of the company or equiva certified translation into English or French if the certified	the company or any other document that evidences its incorporation, if the certificate is a language other than English or French. Alent evidence from the home jurisdiction of such evidence, including ficate/document is a language other than English or French. The laws of Vanuatu including any certificates required under any

Port Vila, Efate, Vanuatu

Form 19 | Notice of change of name of overseas company

Section 155(3), 158(2) Companies Act 2012

Notes

The information on this form must be either typewritten or printed legibly.

The application must be made by a person authorised under the rules of the company, or by a director of a company with the approval of the board.

Present overseas company name Vanuatu	Comp	pany number in
1. Proposed overseas company name		
2. Signed by director or authorised person		
	Signature:	
Print-first name(s) followed by surname in BLOCK letters		
Designation: Director Authorised person Date (dd/m	nm/yyyy): /	/
Name:	Other contact detail	ls:
Address: Tele	ephone:	
Еп	nail (optional):	
4. Checklist		
The following must accompany this form:		
The prescribed fee		
Please deliver documents to Vanuatu Financial Services Commission, Com	panies House, Rue Bou	igainville, PMB 9023.

Port Vila, Efate, Vanuatu

Section 160(1)(a) Companies Act 2012	rs or particulars of	directors of overseas company
Notes For sections 1, 2, 3, and 4 below, complete only the sections that apply.		For office use only Document number
<u>In all cases</u> , complete Section 5 (Particulars of currer	at directors)	
If there is insufficient space on the form to supply th attach a separate sheet containing the information s the prescribed format.	e required information, et out in	Place harcode here
The information on this form must be either typewri	tten or printed legibly.	
Company name		Company number in Vanuat
1. Director(s) ceasing to hold office		
If more than two directors have ceased to hold o Provide information in BLOCK letter format, with first name	office, attach a sheet with the e(s) followed by surname.	the required information.
Full legal name:	Full lega	al name:
Full légal name:	Full legs	al name:
2. Appointment of new director(s) If more than three directors have been appointed Provide information in BLOCK letter format, with first name Full legal name: Physical address: Postal address: Mobile Phone:	please attach a sheet with	Registration number (if a registered entity): Email: Gender (if a natural person): Nationalities/jurisdictions:
Full legal name. Physical address: Postal address:		Registration number (if a registered entity): Email:
Mobile Phone: Full legal name;		Gender (if a natural person): Nationalities/jurisdictions:
Physical address: Postal address: Mobile Phone:		Registration number (if a rogistered entity): Email: Gender (if a natural person): Nationalities/jurisdictions:

Full legal name: Physical address: Postal address: Mobile Phone:	Registration number (if a registered entity): Email: Gender (if a natural person): Nationalities/jurisdictions:
3. Change of current director's name Provide following information if an existing director Director's former surname	New surname
Former first name(s) 4. Change of current director's physical or postal Provide following information if an existing direct Name of director	New first name(s) al address or has changed their physical or postal address.
Former physical address .	New physical address
Former postal address (eg PO Box)	New postal address (eg PO Box)
which this notice is signed.	es of the directors of the above-named company at the date on eet containing the information set out in the prescribed format. Provide by surname.
Full legal name: Physical address: Postal address: Mobile Phone:	Registration number (if a registered entity): Email: Gender (if a natural person): Nationalities/jurisdictions:
Full legal name: Physical address: Postal address: Mobile Phone:	Registration number (if a registered entity): Emaîl: Gender (if a natural person): Nationalities/jurisdictions:

Full legal name: Physical address: Postal address: Mobile Phone:		Registration number (if a registered entity). Email: Gender (if a natural person): Nationalities/jurisdictions:	
6. Signed by director or authorised person Name:		ature:	
Print first name(s) followed by surname in BLOCK letters Designation: Director Authorised person 7. Lodged by	Date (dd/mm/yy	/yy): / /	
Name:	C	Other contact details:	
Address:	Telephone:		
	Email:		
The prescribed fee Please deliver documents to Vanuatu Financial Services 9023, Port Vila, Efate, Vanuatu	Commission, Comp	oanies House, Rue Bougainville, PMB	

Form 21 Notice of change of principal place of business of Section 160(1)(b) Companies Act 2012 Notes If there is insufficient space on the form to supply the required information, attach a separate sheet containing the information set out in the prescribed format.			For office use only Document number
			Place barcode here
The information on this form mu	st be either typewritten or prin	ted legibly.	
C			
Company name			Company number in Vanua
<u>Must</u> be a physical address in 'anuatu. <u>Must not</u> be a PO Box ir Private Bag address.	Province or Municipality:		
. Signed by director or auth			
	orisea person		Signature:
Name:	owed by surname in BLOCK letter.	s	Signature:
Print first name(s) foll Designation: Director			/mm/yyyy): / /
Print first name(s) foll Designation: Director Lodged by	owed by surname in BLOCK letter.		······
Print first name(s) foll Designation: Director b. Lodged by Name:	owed by surname in BLOCK letter.		/mm/yyyy): / /
Designation: Director B. Lodged by	owed by surname in BLOCK letter.	Date (dd/	/mm/yyyy): / /

Please deliver documents to Vanuatu Financial Services Commission, Companies House, Rue Bougainville, PMB 9023, Port Vila, Efate, Vanuatu

Form 22 | Notice of change of postal address of overseas company

Notes The information on this form must	be either typewritten or printe	d legibly.	
There is no fee for filing this form.			
Company name in Vanuatu			Company number
1. Address for postal commun	ication		
Postal address to which communications from the Registrar may be sent (eg PO Box)	Postal address:		
	Province or Municipality (eg Port	Vila):	
	Email address:		
2. Signed by director or autho	rised person		
Name:		Signature:	
Print first name(s) follo	wed by surname in BLOCK letters		
Designation: Director 3. Lodged by	Authorised person	Date (dd/mm/yyyy): /	/
Name:		Other contact deta	ils:
Address:		Telephone:	
		Email:	
Please deliver documents to Van	nuatu Financial Services Com Port Vila, Efato	mission, Companies House, Rue Bo	ugainville, PMB 9023,

Form 23 Notice of change in person Section 160(1)(d) Companies Act 2012	ns authorised	to accept service	ce for overse	eas company	
Notes	*				
For sections 1 and 2 below, complete only the sec	tions that apply.				
In all cases, complete Section 4 (Particulars of persaccept service).	sons authorised to				
If there is insufficient space on the form to supply attach a separate sheet containing the information the prescribed format.		mation,			
The information on this form must be either typev	vritten or printed l	egibly.			
Company name			Company nu	ımber in Vanuatı	í
				The variable	
					and the state of t
The following person resident (or entity incor Vanuatu of documents on behalf of the company. Provide information in BLOCK letter format, with first new Full name if an individual:			norised to acce	pt service in	
Name and registration number if an incorporated entity.					
Physical address:					***
Postal address:					
Province:					
2. Appointment of person having aut NOTE: This person must be licensed under The following person resident (or entity incordocuments on behalf of the company from the Provide information in BLOCK letter format, with first not Full name if an individual:	r the Companies porated) in Vanu e date of registra	s and Trust Services atu is authorised to a			
Name and registration number if an incorporated entity:					

Physica	al address:		
Postal a	address:		
(addres	ses must be in Vanuatu)		
Provinc	re:		
3. Dat	e of change of person authorised to accept service		
Date (d	d/mm/yyyy): / /		
Set out authori given. Note: If t	rticulars of persons authorised to accept service below are the names and addresses of the person(s) resident (or entities incorporated) in Valued to accept service in Vanuatu of documents on behalf of the company at the date on which there are more than three authorised persons please attach a separate sheet containing the information set out in the information in BLOCK letter format, with first name(s) followed by surname.	ch this notice is	
Full leg	al name if an individual:		AM (070 (071) \$ AM (071) 1 (171) 1 (171)
Name a	nd registration number if an incorporated entity in Vanuatu:		
Postal a			
Physica	l address:		
Provinc	e or Municipality:		
Province	e or Municipality:	-	
Name:	C:compatible.		
Tallio.	Signature:		
Full lega	al name if an individual:		
Name ar	nd registration number if an incorporated entity in Vanuatu:	-	
Postal ac	ldress:	THE PROPERTY OF THE PROPERTY O	
Physical	address:	-	
Province	or Municipality:		
		1	

Print first name(s) followed by surname in BLOCK letter	ns		
Designation: Director Authorised person	Date (dd/mm/yyyy):	/	/
5. Lodged by Name:	Other con	tact details:	
Address:	Telephone:		
	Email:		
The prescribed fee			

Please deliver documents to Vanuatu Financial Services Commission, Companies House, Rue Bougainville, PMB 9023, Port Vila, Efate, Vanuatu

Form 24| Annual return of overseas company

Section 161 Companies Act 2012

Notes

If there is insufficient space on the form to supply the required information, attach a separate sheet containing the information set out in the prescribed format.

The information on this form must be either typewritten or printed legibly.

Oversea in Vanua	s company name atu	Company number
	of annual return rmation on the Vanuatu register in respect of the abovenamed company is correct at	Ale des Calin
THE IIIC	mination on the variation register in respect of the abovenamed company is correct at	the date of this return.
	1	
Doto (11	//	
	/mm/yyyy):	Av
undated i	nformation on the Vanuatu company registry is not accurate, the company <u>must submit a cha</u> i nformation.	nge filing that contains the
	ess Sector	
	adicate (circle or underline) the <u>primary</u> sectors your company operates in:	
	company operates in.	
-	Agriculture, forestry, and fishing Mining and quarrying Manufacturing Electricity, gas, steam, and air conditioning supply Water supply; sewerage, waste management, and remediation activities Construction Wholesale and retail trade; repair of motor vehicles and motorcycles Transportation and storage Accommodation and food service activities Information and communication Financial and insurance activities Real estate activities Professional, scientific, and technical activities Administrative and support service activities Public administration and defence; compulsory social security Education Human health and social work activities Arts, entertainment, and recreation Other service activities Activities of households as employers; undifferentiated goods- and services-producing activities Activities of extraterritorial organizations and bodies	ties of households for own
3. Signe	d by director or authorised person	
ſ		

Name:	Signature:
Print first name(s) followed by surname in BLOCK lette	rs
Designation: Director Authorised person	Date (dd/mm/yyyy): / /
4. Lodged by Name:	Other contact details:
Address:	Telephone:
	Email:
5. Checklist	
The following must accompany this form:	
The prescribed fee	

Please deliver documents to Vanuatu Financial Services Commission, Companies House, Rue Bougainville, PMB 9023, Port Vila, Efate, Vanuatu

Form 25| Notice by overseas company of intention

to cease to carry on business

Section 162(1)(b) Companies Act 2012

Notes

The information on this form must be either typewritten or printed legibly.

Overseas company name			Company numb
1. Date to cease to carry on b	ousiness		
The above named company wi	Il cease to carry on business	in Vanuatu on:	
	1	. /	
Date (dd/mm/yyyy): Public notice under section 16: cease to carry on business in V	2(1)(a) of the Companies Ac anuatu was given on:	t 2012 of the intention of th	ne abovenamed company to
	/	1	
Date (dd/mm/yyyy): 2. Signed by director or auth	orised person		
Name:		Signature:	
Print first name(s) follo	owed by surname in BLOCK letters		
Designation: Director or B. Lodged by	Authorised person	Date (dd/mm/yyyy):	/ /
Name:		Other cont	act details:
Address:		Telephone:	
		Email:	
. Checklist			
The following must accompany	y this form:		
A copy of the public notice			

SCHEDULE 1 SCHEDULE 1 FORMS		
The prescribed fee		
Please deliver documents to Vanuatu	Financial Services Commission, Compani Port Vila, Efate, Vanuatu	ies House, Rue Bougainville, PMB 9023,

Form 26 \mid Application for re-registration of a company

Section 209, Companies Act 2012

Note

If there is insufficient space on the form to supply the required information, attach a separate sheet containing the information set out in the prescribed format.

The information on this form must be either typewritten or printed legibly.

Name of existing company					Company Number
1. Original Date of Incorporate	oration (dd/mm/yyyy):			/	/
2. Company Type Priva	ate Company		Public Company		
3. Has the company adop	ted the new	Mode	l Rules?		
Yes	No				
If no, attach a copy of the company's ru	ıles (which may still	be name	d articles of association	n).	
A company must confirm if it wishes to relevant shareholder approvals to adop companies are contained in the Schedu	t the new rules. Mo	odel rules	for private companies,	t 2012. I, single s	f it does so, it must have obtained the hareholder private companies, and public
4. Addresses					
Address of registered office Must be a physical address in Vanuatu. Must not be a PO Box or Private Bag address.					
	Province or Munic	ipality:	***************************************		
	L				
Postal address to which communications from the Registrar may be sent (eg PO Box) (this may	Postal address:				
be the same as the registered office only if the postal service delivers to that address).	Province or Munic	cipality:			
	Email address:				

5. Directors

The following persons are the directors of the company. All of the following named directors have consented to act in that capacity.

Note: If there are <u>more than three</u> directors, attach a separate sheet containing the information set out in the prescribed format. Provide information in BLOCK letter format, with first name(s) followed by surname.

Full legal name: Physical address: Postal address: Mobile Phone:	Registration number (if a registered entity). Email: Gender (if a natural person): Nationalities/jurisdictions.
Full legal name: Physical address: Postal address: Mobile Phone:	Registration number (if a registered entity): Email: Gender (if a natural person): Nationalities/jurisdictions:

6. Shareholders

The following person(s) are the shareholder(s) of the company. The Applicant attests that the person(s) shown as shareholder(s) has consented to act in this capacity.

Instructions for completing shareholder information

- 1. If there are <u>more than three</u> shareholders, attach a separate sheet containing the information set out in the prescribed format. All names should be set out in BLOCK letter format.
- 2. If the shareholder is a natural person, provide their first name followed by their surname. If the shareholder is a registered entity (such as another company), provide the entity name and registration number.
- 3. If shares are jointly held, provide the particulars of each shareholder within a single box below.

Number of shares: Name(s) of shareholder(s):	Registration number (if a registered emity): Gender (if a natural person): Nationality/jurisdiction of shareholder:

	Registration number (if a registere entity): Gender (if a natural person): Nationality/jurisdiction of shareho
Number of shares: Name(s) of shareholder(s):	Registration number (if a registered entity): Gender (if a natural person): Nationality/jurisdiction of sharehol
Is there more than one class of shares for this company	Total number of shares: Yes No
If yes, attach a separate sheet that sets out the particula 7. Business Sector	s of the different classes of shares.

DECLARATION: By signing this application, we declare that all information in this re-registration for is true, correct and up-to-date. The applicants will not hold VFSC responsible for any information to be included in the company registry and provided to the VFSC that is incorrect or misleading.

Where there is more than one applicant, each must provide their full legal name and postal address. As email will be the main form of communication, please provide a regularly used email address. In the case of a natural person, please give first name(s) following by surname in BLOCK letters.

Full legal name of applicant*:	
Postal address of applicant.	Signature:
Email address of applicant:	Date (dd/mm/yvyy):
Full legal name of applicant*:	
Postal address of applicant:	Signature:
Email address of applicant:	Date (dd/mm/yyyy).
9. Lodged by	
Name:	Other contact details:
Address:	Telephone:
	Email:
10. Checklist	
The following must accompany this form:	
A copy of the company rules, if they differ from the model ru Note: You do not need to submit a copy if the company's rule title 'Articles of Association'.	les in the Schedules to the Companies Act 2012. es are the model rules. The company rules may still contain the
The prescribed fee	

Please deliver documents to Vanuatu Financial Services Commission, Companies House, Rue Bougainville, PMB 9023, Port Vila, Efate, Vanuatu

Form 27 | Application for re-registration of an overseas company

Section 209, Companies Act 2012

Note

If there is insufficient space on the form to supply the required information, attach a separate sheet containing the information set out in the prescribed format.

The information on this form must be either typewritten or printed legibly.

Name of existing company		Company Number	Processing and Proces
1. Date of Registration Date	e (dd/mm/yyyy):		interference and control of the cont
2. Addresses			
Address of place of business or principal place of business of overseas company Must be a physical address in Vanuatu. Must not be a PO Box or			***************************************
Private Bag address.	Province or Municipality:		***************************************
			ERROTTIC CO.
Postal address to which	Postal address:		
communications from the Registrar may be sent(eg PO Box) (this may be the same as the			
registered office only if the postal service delivers	Province or Municipality:		
to that address).	-		
	Email address:		

3. Person(s) authorised to accept service in Vanuatu of documents on behalf of the company

The following person resident (or entity incorporated) in Vanuatu is authorised to accept service in Vanuatu of documents on behalf of the company.

Note: If more than one person is authorised to accept service in Vanuatu, provide information about each such person on a separate sheet attached to this application. Provide information in BLOCK letter format. In the case of a natural person, give first name(s) followed by surname in BLOCK letters.

Full name: *	
Physical Address: Must be an address in Varuatu	
Province or Municipality (e.g., Port Vila):	

4. Directors

The following persons are the directors of the company. All of the following named directors have consented to act in that capacity.

Note: If there are <u>more than three</u> directors, attach a separate sheet containing the information set out in the prescribed format. Provide information in BLOCK letter format, with first name(s) followed by surname.

Full legal name: Physical address: Postal address: Mobile Phone:	Registration number (if a registered entity): Email: Gender (if a natural person): Nationalities/jurisdictions:
Full legal name: Physical address: Postal address: Mobile Phone:	Registration number (if a registered entity): Email: Gender (if a natural person): Nationalities/jurisdictions:
Full legal name: Physical address; Postal address: Mobile Phone:	Registration number (if a registered entity): Email; Gender (if a natural person): Nationalities/jurisdictions:

5. Business Sector

Please indicate (circle or underline) the primary sector your company operates in:

- Agriculture, forestry and fishing
- Mining and quarrying
- Manufacturing
- Electricity, gas, steam and air conditioning supply
- Water supply; sewerage, waste management, and remediation activities
- Construction
- Wholesale and retail trade; repair of motor vehicles and motorcycles
- Transportation and storage
- Accommodation and food service activities
- Information and communication
- Financial and insurance activities
- Real estate activities
- Professional, scientific and technical activities
- Administrative and support service activities
- Public administration and defence; compulsory social security
- Education
- Human health and social work activities

- Arts, entertainment and recreation
- Other service activities
- Activities of households as employers; undifferentiated goods- and services-producing activities of households for own use
- Activities of extraterritorial organizations and bodies

6. Applicant(s)

The prescribed fee

DECLARATION: By signing this application, we declare that all information in this re-registration for is true, correct and up-to-date. The applicants will not hold VFSC responsible for any information to be included in the company registry, provided to the VFSC that is incorrect or misleading.

Where there is more than one applicant, each must provide their full legal name and postal address (eg PO Box). As email will be the main form of communication, please provide a regularly used email address. In the case of a natural person, please give first name(s) following by surname in BLOCK letters.

in BLOCK letters.	7 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
Full legal name of applicant*:	
Postal address of applicant:	Signature:
Email address of applicant:	Date (dd/mm/yyyy):
Full legal name of applicant*:	
Postal address of applicant:	Signature:
Email address of applicant:	Date (dd/mm/yyyy):
7. Lodged by	
Name:	Other contact details:
Address:	Telephone:
	Email:
8. Checklist The following must accompany this form:	

Please deliver documents to Vanuatu Financial Services Commission, Companies House, Rue Bougainville, PMB 9023, Port Vila, Efate, Vanuatu

SCHEDULE 2

TABLE OF FEES PAYABLE TO REGISTRAR OF COMPANIES AND PENALTIES

(Regulations 5 and 6)

PART 1

Table of fees payable to Registrar of Companies

Description	Fee if the task is administered by the user through the online registry (VT)	Fee if the task is administered outside of the online registry (eg paper form or via email) (VT)
For an application to register a company under section 6 Companies Act 2012	30,000	35,000
For a registration of an annual return under section 119 Companies Act 2012	30,000	35,000
For an application of a public company to become a private company under section 9 Companies Act 2012	100,000	120,000
For an application of a private company to become a public company under section 9 Companies Act 2012	50,000	60,000
For an application of a private company to become a community company under section 9 Companies Act 2012	25,000	30,000
For an application to change the name of a company under section 11 Companies Act 2012	20,000	30,000
For a notice of adoption or alteration of company rules under section 14 Companies Act 2012	No fee	10,000
For a notice of change of registered office under sections 18 and 121 Companies Act 2012	No fee	10,000
For a notice of change of postal address under sections 18 and 121 Companies Act 2012	No fee	10,000
For a notice of issue of shares under sections 25 and 121 Companies Act 2012	No fee	10,000
For a notice of acquisition of by company of own shares under sections 30 and 121 Companies Act 2012	No fee	10,000
For a notice of redemption by company of shares under sections 34 and 121 Companies Act 2012	No fee	10,000
For a notice of transfer of shares in company under sections 37 and 121 of Companies act 2012	No fee	10,000
For a notice of change of shareholder particulars	No fee	10,000
For a notice of change of directors and particulars of directors under section 85 Companies Act 2012	No fee	10,000
For a notice of location or change in location of company records under section 113 Companies Act 2012	No fee	10,000

For an application for registration of amalgamation proposal under section 136 and Schedule 6 Companies Act 2012	Not applicable	50,000
For provision of consent and certificate of director of amalgamated company under section 136 and Schedule 3	No fee	No fee
Companies Act 2012 For application registering a court ordered amalgamation under section 136 and Schedule 6 clause 3 Companies act	No fee	50,000
2012 For a request to remove a company from the register under	No fee	No fee
section 140(c)(1) Companies Act 2012 For an application to restore a company for failure to file an annual return under section 150 Companies Act 2012	50,000	60,000
Overseas Companies		
For an application to register an overseas company on the	50,000	60,000
Vanuatu register under section 157 Companies Act 2012	30,000	00,000
For registration of an annual return of overseas company under section 161 Companies Act 2012	50,000	60,000
For a notice of change of name of overseas company under sections 155(3) and 158(2) Companies Act 2012	20,000	22,000
For a notice of change in directors or their particulars in an overseas company	No fee	10,000
For a notice of change of principal place of business of overseas company under section 160(1)(b) Companies Act	No fee	10,000
2012	No fee	10.000
For a notice of change of postal address of overseas company For a notice of change of persons authorized to accept service	No fee	10,000
for overseas company under section 160(1)(d) Companies Act 2012	No fee	10,000
For a notice by overseas company of intention to cease to carry on business under section 162(1)(b) Companies Act 2012	No fee	10,000
Re-registration		
For an application for re-registration of a private, public or overseas company under section 209 Companies Act 2012:	* 10 mg	
- within the first six months of commencement of the Companies Act 2012	No fee	No fee
- between six and nine months from commencement of the Companies Act 2012	30,000	33,000
- over nine months from commencement of the Companies Act 2012	50,000	55,000
Other		
For a certified physical copy of a certificate of incorporation	Not applicable	5,000
For a certified physical copy of a company extract	Not applicable	5,000
For a photocopy of any extract from a physical file of a company registry file held by the registrar of companies per A4 sheet	Not applicable	100
To scan a copy of the company rules into digital format:	Not applicable	100/page
To scan any other document forming required to be provided to the registrar of companies per page scanned	Not applicable	100/page

PART 2

Penalties

Failure to deliver a document to the Registrar but providing such

10,000

document within 25 working days after the time prescribed by the Act

Failure to deliver a document to the Registrar within 25 working days

25,000

after the time prescribed by the Act