Form 26 Application	for re-registi	ration		
of a company		For office use only		
		Document number		
Section 209, Companies Act 202	12			
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.		Pla	ace barcode here	
The information on this form must	be either typewritt	en or printed legibly.		
Name of existing company			Company Numbe	
Name of existing company			Company Number	:1
1 Original Data of Income				
1. Original Date of Incorpo	(dd/mm/yyyy):		/ /	
2. Company Type Priva	te Company	Public Company		
3. Has the company adopt	ed the new Mo	odel Rules?		
Yes	No			
If no, attach a copy of the company's ru	ıles (which may still b	e named articles of association).		
A company must confirm if it wishes to approvals to adopt the new rules. Mod the Companies Act 2012.		·		ave obtained the relevant shareholder ompanies are contained in the Schedules of
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 Municip	pality:		
		•		
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 Municip	pality:		
	Email address:			

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

5. 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.

<u>Instructions for completing shareholder information</u>

- 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.

	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):
	Nationality/jurisdiction of shareholder:
Number of shares:	Registration number (if a registered entity):
Name(s) of shareholder(s):	Gender (if a natural person):
	Nationality/jurisdiction of shareholder:
Total nur	nber of shares:
Is there more than one class of shares for this company?	Yes No
If yes, attach a separate sheet that sets out the particulars of the difference	ent classes of shares.
6. Business Sector	
Please indicate (circle or underline) the <u>primary</u> sector your company o	perates in:
 Agriculture, forestry and fishing Mining and quarrying Manufacturing Electricity, gas, steam and air conditioning supply Water supply; sewerage, waste management, and remediation activities 	 Real estate activities Professional, scientific and technical activities Administrative and support service activities Public administration and defence; compulsory social security Education

- 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

- 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

7. Applicant(s)

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:
Full legal name of applicant*:	
Tull legal harne of applicant.	
Postal address of applicant:	Signature:
8. Lodged by	
Name:	Other contact details:
	Telephone:
l	
Address:	Farail.
	Email:
9. Checklist	
3. Circollist	
The following must accompany this form:	
A copy of the company rules, if they differ from the model rules in the	
	he model rules. The company rules may still contain the title 'Articles of
Association'.	
The prescribed fee	
UBO Declaration Form	

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