

COMMERCIALREGISTER OF THE CHAMBER OF COMMERCE AND INDUSTRY OF BONAIRE

THIS SECTION TO BE COMPLETED BY THE COMMERCIAL REGISTER

Date of receipt

Statement number:

File number:

Deed letter:

The Secretary orders registration of the statement in the Register:

Date:

Signature:

Model T: Other registrations

Why this Form?

This form is used to register details for which no specific form is prescribed.

Problems?

Call the Commercial Register in case you have problems or questions, for instance in completing this form

In case you make a mistake while completing the form, simply strike through the wrong answer and write the correct one. Be sure to also add your signature to any changes!

Why the Commercial Register?

Registration of companies and legal entities is mandatory under the Trade Register Ordinance. The information that you provide on this form will be entered into the Commercial Register. The Register is public: other people will be able to retrieve your information and you may also retrieve information on other registrations, e.g. your potential trade partners. In this way the Commercial Register contributes to security in conducting business.

Information for the first registration of a business and other mandatory registrations must be submitted within one (1) week from the commencement of the business activities or, if applicable, from the date of the occurrence giving rise to mandatory registration..

1. Details of the business or legal entity

Details of the business or legal entity
To which organization does the change(s) pertain?

Name:

Address: ...

In case the organization is already registered, state the file number.

File number: ..

2. Contents of the registration

a. Date commencement

.....

b. Description

--	--

3. Signature

This form may only be signed by:
 - owner of a sole proprietorship;
 - the (managing) partner(s) of a public partnership or a limited public partnership;
 - the director(s) of a legal entity;
 - a civil law notary;
 - an authorized representative.

Signer(s) must provide proof of a valid ID

The undersigned declare(s) that this form was completed truthfully.
 Capacity of the authorized signer(s):

Surname and initial(s):

Date:

Signature(s) :