



## SHAREHOLDERS DATA FORM

Company Name: \_\_\_\_\_

Company Registration No.: \_\_\_\_\_

V.A.T No.: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Registered Address - Street: \_\_\_\_\_

No.: \_\_\_\_\_

Town: \_\_\_\_\_

Postal Code: \_\_\_\_\_

P.O.Box: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Tel.: \_\_\_\_\_

Fax: \_\_\_\_\_

Website: www. \_\_\_\_\_

Email address: \_\_\_\_\_

Date: \_\_\_\_\_

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