

**COMPANY APPLICATION FORM
TERMS & CONDITIONS OF BUSINESS****DEFINITIONS AND INTERPRETATION**

In these terms and conditions:

“**Agreement**” means the contract between Multilysis and the client with these Terms and Conditions shall form an integral part.

“**Client**” means the applicant whose description and address are set out in this form.

“**Company**” means any one or more companies in respect of which Multilysis provides Services at the Client’s request.

“**Services**” means any company formation, management or administration services whatsoever in respect of a Company.

FEES AND SERVICES

1. The Client agrees to pay the fees charged by Multilysis for the provision of Services. This includes fees for annually recurring Services billed at the rates applied by Multilysis from time to time. Although effort is made to maintain the same fee level for as long as possible, Multilysis reserves the right to increase the level of annual fees payable but shall give the Client not less than 30 days’ notice of any increase prior to commencing provision of relevant Services. Additional work undertaken on behalf of the Client shall be paid for on a time-spent basis at the hourly rate then applicable.
2. Fees shall be payable immediately upon issue of invoices to the Client. The invoices must be paid within 21 days from their date of issue. At the expiration of this time limit, interest is charged at 7%. For payments carried out by cheques, receipts will be issued only once the same is cleared from the bank.
3. In the event of the Client failing to settle any invoice by the due date the Client and/or the Company authorises Multilysis to deduct fees from any account, monies or property under the control of Multilysis in which the Client or the Company has a legal or beneficial interest and whilst any such fees remain outstanding Multilysis shall have a lien on any papers books or records and/or all assets of the Company or the Client which are in the possession or under the control of Multilysis.
4. The Client acknowledges that late or non-payment of fees may result in a Company being struck-off the register of companies in the jurisdiction of incorporation. The Client further acknowledges that unless and until the Company is struck-off or otherwise liquidated, the Client shall remain liable to pay for the provision of continuing Services and all government fees and other disbursements payable to third parties.
5. If the Client no longer requires Multilysis to provide Services to a Company, not later than 30 days after the date of an invoice for annual Services, the Client shall give written notice to Multilysis, accordingly failing which, the Client shall be deemed to have accepted liability to pay for such Services and shall be liable for the payment of the said invoice in full.
6. Services are provided on an annual basis and Multilysis shall not, without prior written agreement, be required to provide such Services for shorter periods or for part only of the relevant annual period.
7. Without prior agreement, Multilysis will not pay interest on any monies held by or on behalf of a Client.
8. A termination fee shall be payable by the Client to Multilysis upon the Services no longer being required, whether as a result of the winding up or disposal of the Company, the transfer of management or otherwise. The termination fee shall be monies Multilysis shall be entitled to charge additional fees for documentary work, time spent in effecting such termination and disbursements payable to third parties.
9. Multilysis reserves the right to refuse to accept instructions from a Client or to discontinue the provision of Services without giving any reasons there for.
10. When Multilysis provides directors and/or company secretary (Officers) to a Company:
 - a. The Client shall at all times indemnify and keep indemnified the Officers in respect of all actions, claims and demands, losses and costs made against or suffered or incurred by the Officers in the exercise or purported exercise of their duties unless the Officers shall be guilty of personal dishonesty.
 - b. If the Client fails to pay fees when due or respond promptly to requests for information, the Officers shall be entitled to resign their services and the Client hereby irrevocably and unconditionally appoints Multilysis his attorney and agent for the purpose of appointing the Client as Officer in their place.
11. When Multilysis provides registered office facilities to a Company:
 - a. In case the Client fails to pay fees when due, the Client irrevocably and unconditionally appoints Multilysis as his attorney and agent for the purpose of transferring the registered office address to an address of the Client’s choice.
12. When Multilysis provides nominee shareholder services to a Company:
 - a. If the Client fails to pay fees when due or respond promptly to requests for information, the nominee shareholder shall be entitled to transfer the shares he is holding in the Company to the beneficial owner/s and the Client hereby irrevocably and unconditionally appoints Multilysis as his attorney for the purpose of proceeding with such transfer of shares.
13. Work cannot commence until payment has been received. Payments can be made by cheque drawn on a Cyprus account or by direct transfer to our bank accounts which are held with Hellenic Bank Public Company Ltd, Account no. 240-01-370704-02, SWIFT Code: HEBACY2N, IBAN number CY5400500240002400137070402, Eurobank Cyprus Ltd, Account no. 003-2001-0012777-7, SWIFT Code: ERBKCY2N, IBAN number CY41018000030000200100127777 & RCB Bank Ltd, Account no. 033472001, SWIFT Code: RCBLCY2I, IBAN number CY4212600000000000033472001. In each case the account name is Multilysis Services Limited. If payment is made direct to our bank account then it is important that a clear reference is made to the proposed company name so that payments can be correctly identified. Please enclose a copy of details of the bank transfer instructions clearly showing the remitting bank, the date of the transfer and the amount and currency transferred. Please make sure the bank charges are born by the payer.

DUE DILIGENCE PROCEDURES

14. In accordance with the Prevention and Suppression of Money Laundering Activities Law of 2007 (188(I)/2007), Multilysis is required to confirm and verify the identity of clients at the outset of a business relationship (& at various other intervals). We are required to make it clear that our business relationship can only proceed once we have obtained satisfactory evidence of such identity and that is why we comprehensive client identification & verification procedures in place.

DATA PROTECTION-CONFIDENTIALITY

15. It is recognised that the information provided in this application form constitutes personal data and details. By completing this signifies that you provide your informed consent to the taking and keeping of such information by Multilysis for any such period deemed reasonable and necessary by the latter. It remains at all times the responsibility of the client to inform and/or update Multilysis in case of any change in such information and/or personal data and details and/or in the event that the client wishes to withdraw his/her consent to the kept record of the said information by Multilysis.

The following information is necessary for the incorporation and establishment of a Cyprus Company. **CYPRUS**

CONTACT INFORMATION

Full Name _____ Occupation _____
 Full Residential Address _____
 Nationality _____ Mob _____ Tel _____ Fax _____
 Email _____

PROPOSED NAME OF COMPANY

STATE DESIRED COMPANY NAME (Please state at least three alternative names in order of preference). If the name is similar or identical to a company name related or of the same group, please mention it. *Note: A company name always ends with the word "Limited" or "Ltd"*

1. _____
 2. _____
 3. _____

PROPOSED TRADE NAMES / TRADE MARKS (if applicable)

1. _____
 2. _____

MAIN ACTIVITIES AND NATURE OF COMPANY

Please indicate the relevant activities (Please provide full description of activities – i.e. "holding company" will not be sufficient).

Please describe the assets that will be held by the Company (Source from which the assets/funds have been derived/ acquired (Explanations such as "inheritance" or "sale of property" are not sufficient and require further clarification) & projected amounts of funds

Please attach the following for the beneficial owner/s of the Company:

- 1) Certified copy of passport (certified by a Public Notary or equivalent, Cypriot Embassies, or Consulate);
- 2) Recent utility bill verifying address (not older than 3 months);
- 3) Reference Letter from a reputable financial institution.

The below should be completed only if shareholder (person(s) holding the shares) is **not** the same as the beneficial owner:

BENEFICIAL OWNER 1

Full Name: _____ Occupation: _____
 ID No. (only if Cypriot) / Passport No.: _____
 Full Residential Address: _____
 Nationality: _____ Email: _____
 Tel. No.: _____ Mob. No.: _____ Fax: _____

BENEFICIAL OWNER 2

Full Name: _____ Occupation: _____
 ID No. (only if Cypriot) / Passport No.: _____
 Full Residential Address: _____
 Nationality: _____ Email: _____
 Tel. No.: _____ Mob. No.: _____ Fax: _____

CAPITAL

The proposed Authorised capital of the company is usually expressed in euro (€), Cyprus official currency. Stamp Duty is payable and calculated on the basis of the value of the nominal capital.
A minimum of 1 share must be issued.

Unless we are otherwise instructed, the company will be incorporated with an authorised & issued share capital of €1.000 divided into 1.000 shares of €1 each.

Standard issued and authorised share capital Yes No

If no, please complete the following:

Authorised Share Capital _____

Issued Share Capital _____

Fully Paid Share Capital _____

One Class of shares to be authorised Yes No

If no, please provide us with a separate schedule explaining your requirements

SHAREHOLDERS

The company must have a minimum of one registered shareholder at all times. Corporate shareholders are allowed.

For due diligence purposes we need to identify a natural person as the beneficial owner.

IF THE SHAREHOLDER IS A NATURAL PERSON, please enclose the following:

- 1) Certified copy of passport (certified by a Public Notary or equivalent, Cypriot Embassies, or Consulate);
- 2) Recent utility bill verifying address (not older than 3 months);
- 3) Reference Letter from a reputable financial institution.

IF THE SHAREHOLDER IS A LEGAL PERSON/ENTITY, please enclose the following:

- 1) Certified copies of certificates of incorporation, registered office and certificates of shareholders, directors and secretary;
- 2) Certified copy of Memorandum and Articles of Association;
- 3) Reference Letter from a reputable financial institution relating to the UBO/s and Director/s;
- 4) Certificate of Good Standing.

SHAREHOLDER 1

Full Name _____ Occupation _____
 Full Residential Address _____
 Nationality _____ Passport No./ ID No _____
 Tel _____ Fax _____
 Email _____ Date of Birth _____
 No. of Shares to be held _____

SHAREHOLDER 2

Full Name _____ Occupation _____
 Full Residential Address _____
 Nationality _____ Passport No./ ID No _____
 Tel _____ Fax _____
 Email _____ Date of Birth _____
 No. of Shares to be held _____

SHAREHOLDER 3

Full Name _____ Occupation _____
 Full Residential Address _____
 Nationality _____ Passport No./ ID No _____
 Tel _____ Fax _____
 Email _____ Date of Birth _____
 No. of Shares to be held _____

REGISTERED OFFICE & SECRETARY

Please indicate whether **MultiLysis Services Ltd** is to provide the **Registered Office** and/or **Secretary** for the company: Yes No

If **No**, please provide details of the **Registered Office** address:

If **No**, please provide details of the **Secretary**:
 Full Name: _____ Occupation: _____
 ID No. (only if Cypriot) / Passport No.: _____
 Full Residential Address: _____
 Nationality: _____ Email: _____
 Tel. No.: _____ Mob. No.: _____ Fax: _____

IF THE SECRETARY IS A NATURAL PERSON, please enclose the following:

- 1) Certified copy of passport (certified by a Public Notary or equivalent, Cypriot Embassies, or Consulate);
- 2) Recent utility bill verifying address (not older than 3 months);
- 3) Reference Letter from a reputable financial institution.

IF THE SECRETARY IS A LEGAL PERSON/ENTITY, please enclose the following:

- 1) Certified copies of certificates of incorporation, registered office and certificates of shareholders, directors and secretary;
- 2) Certified copy of Memorandum and Articles of Association;
- 3) Reference Letter from Bank / Accountant / Auditor / Lawyer;
- 4) Certificate of Good Standing

DIRECTORS

Any person may be appointed as a director of the company. Corporate directors are allowed. A minimum of one director is required.

Do you require **MultiLysis Services Ltd** to be appointed as corporate Director Yes No

Do you require **MultiLysis Services Ltd** to appoint a physical director/s? Yes No

If **No**, or if you wish to appoint your own Director, please provide the following information for each Director.

IF THE DIRECTOR IS A NATURAL PERSON, please enclose the following:

- 1) Certified copy of passport (certified by a Public Notary or equivalent, Cypriot Embassies, or Consulate);
- 2) Recent utility bill verifying address (not older than 3 months);
- 3) Reference Letter from a reputable financial institution.

IF THE DIRECTOR IS A LEGAL PERSON/ENTITY, please enclose the following:

- 1) Certified copies of certificates of incorporation, registered office and certificates of shareholders, directors and secretary;
- 2) Certified copy of Memorandum and Articles of Association;
- 3) Reference Letter from Bank / Accountant / Auditor / Lawyer;
- 4) Certificate of Good Standing

DIRECTOR 1

Full Name: _____ Occupation: _____
 ID No. (only if Cypriot) / Passport No.: _____
 Full Residential Address: _____
 Nationality: _____ Email: _____
 Tel. No.: _____ Mob. No.: _____ Fax: _____

DIRECTOR 2

Full Name: _____ Occupation: _____
 ID No. (only if Cypriot) / Passport No.: _____
 Full Residential Address: _____
 Nationality: _____ Email: _____
 Tel. No.: _____ Mob. No.: _____ Fax: _____

DIRECTOR 3

Full Name: _____ Occupation: _____
 ID No. (only if Cypriot) / Passport No.: _____
 Full Residential Address: _____
 Nationality: _____ Email: _____
 Tel. No.: _____ Mob. No.: _____ Fax: _____

DUE DILIGENCE

Please confirm that the following documents required for each beneficial owner, director and shareholder are enclosed:

Notarised copy of Passport/ ID	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Original Bank Reference letter	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Confirmation of Residential Address	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Curriculum Vitae	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Notarised Copies of Corporate Documents (Corporate Shareholders/Directors)	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Please note that all documents should either be in **Greek** or **English** language.

OFFICE FACILITY

Do you require **Multilysis Services Ltd** to provide for **office facility** to the Company? Yes No

If **Yes**, please provide details of what is required (*please provide other details that may be required in the space given below*)

Telephone answering	<input type="checkbox"/>
Email address	<input type="checkbox"/>
Mail Forwarding	<input type="checkbox"/>
Company business cards	<input type="checkbox"/>

Do you require **Multilysis Services Ltd** to provide **virtual office facilities** to the Company? Yes No
(this includes Business Address, Mail Collection & Forwarding)

BOOK-KEEPING & ACCOUNTING SERVICES

Do you require **Multilysis Services Ltd** to provide the above services? Yes No

MANAGEMENT & ADMINISTRATION SERVICES

Do you require **Multilysis Services Ltd** to provide the above services? Yes No

AUDITORS

A Cyprus registered company is required to file annual audited accounts with the Registrar of Companies and the Inland Revenue Dept.

Do you require **Multilysis Services Ltd** to suggest a local Auditor? Yes No

BANKING SERVICES

We also offer services relating to the establishment and operating of bank accounts in Cyprus & abroad. Accounts may be opened in a variety of foreign currencies.

Do you require **Multilysis Services Ltd** to open a bank account for the company in Cyprus? Yes No

If **Yes**, please state the name of the Banking Institution and the relevant currency/ies of the account/s you require:

Please note that local regulations provide that funds must be brought from abroad.

OTHER

Person indicated to receive correspondence including company's corporate certificates
 Full Name _____
 Address _____
 Tel. _____ Fax _____
 Email _____

Person authorised by beneficial owner/s to give instructions (*if different from above*)
 Full Name _____
 Address _____
 Tel. _____ Fax _____
 Email _____

DOCUMENTS TO BE OBTAINED UPON REGISTRATION

The certificates to be obtained upon registration are as follows:

- Incorporation certificate - (in Greek or in English)
- Directors and secretary certificate – (in Greek or in English)
- Shareholders certificate – (in Greek or in English)
- Registered office certificate –(in Greek or in English)

Indicate the language in which the above certificates should be issued: Greek English

The M&A of the Company is always obtained certified in Greek. In case an additional translated in English M&A is required this can be obtained at an extra fee.

Please tick what is required:

- a) A simple translation of M&A in English
- b) A certified by the Registrar translation of M&A in English

APOSTILLED DOCUMENTS

If required, please specify which documents would need to be apostilled _____

Declaration by the ultimate beneficial owner (UBO) of Company “.....”

I, the undersigned, being the UBO of (Company's name), request that **MULTILYSIS SERVICES LIMITED** acts as our service provider and declare and affirm that:

- (a) I am aware that the provision of corporate services is regulated by the **Prevention and Suppression of Money Laundering Activities Laws of 2007 as amended**, and as such, **directors and staff in Firms providing corporate services**, having any knowledge or suspicion that another person is involved in a money laundering or terrorist financing offence and who has become aware of the information on which the knowledge or reasonable suspicion is based in the course of his occupation, profession or business, **are required to disclose such information to the Unit of Combating Money Laundering (MOKAS)**. In such circumstances they are not obliged to discuss such reports with clients because of the restrictions imposed by the tipping off provisions of the anti-money laundering legislation.
- (b) **I have not been involved in any illegal activity** in any part of the world and have not been **declared bankrupt** or have been a director or otherwise concerned in the management of any company which has been subject to an insolvent liquidation and/or I am unaware of any activities I have engaged in, that involve money-laundering.
- (c) **Any contributions that will be made into the Company** as share capital or otherwise as shareholder's funds or from external financing **will not derive from unlawful or immoral sources** either in their country of origin or in my country of ordinary residence or in Cyprus.
- (d) **If applicable** - The settlor or named beneficiary(ies) of a trust holding a beneficial interest have not been involved in any illegal activity and have not been declared bankrupt anywhere in the world.
- (e) I am/ I am not **(delete as appropriate) an individual with United States indicia** i.e. address, phone no., place of birth, citizenship or dealings* with US.

* i) standing instructions to transfer funds to an account maintained in the US, ii) a power of attorney or signatory authority which is granted to a person with a US address or iii) existence of an "in care of" or "hold mail address" or U.S. P.O.Box.

- (f) I have/ have not been **(delete as appropriate) entrusted with a public prominent function.**
- (g) I am related to a person/am not **related to any person (delete as appropriate) who holds a public function.**
- (h) I have been included in a list/have never been included in any list **(delete as appropriate) of Politically Exposed Persons (PEPs).**

Furthermore, I hereby confirm that the information provided above is true, correct and complete and agree to immediately notify MultiLysis in writing in case of a change with respect to the above and representations made herein.

Additionally, I hereby agree for MultiLysis to disclose my identity as UBO of the Company to any commercial bank for the purpose of opening a bank account in the name of the Company.

Full Name: _____

Address: _____

Passport No. / ID No.: _____

Signature: _____ Date: _____

OTHER DETAILS REQUIRED

Please send by email/courier/fax this form, duly completed, accompanied by the following:

Certified Copy Passport/Identity Card

A certified copy (by a suitable person such as a lawyer, an accountant, a notary public etc) of the beneficial owner's / Director's passport (photograph and signature pages only).

Proof of Address

This can be fulfilled by providing a recent utility bill (at least 6 months old), true copy of current driving licence (the address should be stated therein), a current bank statement. This document must be certified by a suitable person such as a lawyer, an accountant, a notary public etc.

Reference

A reference letter should be provided from a professional who knows the beneficial owner/s in a professional capacity. The reference letter should be addressed to **MultiLysis Services Ltd.**

Please note that all documents should be in either **Greek or **English** language*

For further information regarding the above, please contact our firm at the following address:

Tel: 00357-25 350006

Fax: 00357-25 350009

Email: info@multilysis.com

WE THANK YOU FOR YOUR PREFERENCE IN OUR SERVICES