

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 in respect of a Company.

FEES AND SERVICES

1. The Client agrees to pay the fees charged by Multilysis for the provision of Services which may include fees for annually recurring Services billed at the rates applied by Multilysis from time to time. Annual fees are pre-payable and non-refundable in case of Termination of Services by either of the parties. 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. If the Client no longer requires Multilysis to provide the Services, the Client shall give written notice to Multilysis, not later than 21 days after the date of an invoice for annual Services. In case the Client fails to give such notice, the latter 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.
3. The invoices must be paid within 30 days from their date of issue. At the expiration of this time limit, interest may be charged at the rate of 4%. For payment carried out by cheques, receipts will be issued only once the same is cleared from the bank.
4. In the event of the Client failing to settle any invoice by the due date, the Client and/or the Company authorizes 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.
5. 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 for the relevant annual period.
6. Multilysis will not pay interest on any monies held by or on behalf of a Client.
7. A termination/exit 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 depends on time spent for documentary work required in effecting such termination plus disbursements/expenses payable to third parties.
8. Multilysis reserves the right to refuse to accept instructions from the Client and also to discontinue the provision of Services without giving any reasons there for.
9. When Multilysis provides director services and/or company secretary services (Officer(s)) 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 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.
10. In case Multilysis provides nominee shareholder services to a Company and 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).
11. Work cannot commence until payment has been received. Payments can be made by cheque drawn on 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: CY54005002400002400137070402, **Eurobank Cyprus Ltd**, Account no. 003-2001-0012777-7, SWIFT Code: ERBKCY2N, IBAN: CY41018000030000200100127777 and **RCB Bank Ltd**, Account no. EUR 033472001, SWIFT Code: RCBLCY2I, IBAN: CY42 1260 0000 0000 0000 3347 2001. 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 and details of payment (invoice no etc.) so that payments can be correctly identified. Please make sure the bank charges are borne by the payer.

DUE DILIGENCE

12. In accordance with the Prevention and Suppression of Money Laundering Activities Law of 2007 (188(I)/2007), as amended, Multilysis is required to confirm and verify the identity of clients at the outset of a business relationship (& at various other intervals). Client business relationship can only proceed once we have carried out our due diligence procedures and have obtained satisfactory evidence of Client's identity. For this purpose Multilysis has comprehensive Client Identification & Verification procedures in place.

DATA PROTECTION

13. It is recognised that the information provided hereinbelow relating to a natural person constitutes personal data in accordance with the General Data Protection Regulation. Your signature on page 7 of this Form (Declaration) signifies that you provide your informed consent to the collection and processing of such information by Multilysis, for any such period pursuant to our Privacy Policy found online on our website. **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, subject to the legitimate interest applicable.**

CONTACT INFORMATION

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

NAME OF COMPANY

Please complete one of the below:

1) **DESIRED COMPANY NAME** (Please provide three alternatives in order of preference):

a. _____
 b. _____
 c. _____

2) **APROVED COMPANY NAME** (If the Company is already registered, please provide us with a recent full set of Certificates):

PROPOSED TRADE NAMES / TRADE MARKS (if applicable)

1. _____
 2. _____

MAIN ACTIVITIES & 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 & projected amount of funds:

BENEFICIAL OWNERS

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

Please provide the following for the beneficial owner(s) of the Company:

1. Certified copy of I.D. No. (only if Cypriot) or passport (certified by a Public Notary or equivalent, Cypriot Embassies, or Consulate);
2. Recent utility bill verifying residential address (not older than 3 months);
3. Reference Letter from a reputable financial institution;
4. CV;
5. Non-Criminal Record.

BENEFICIAL OWNER 1

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

BENEFICIAL OWNER 2

Full Name _____ Occupation _____
 I.D. 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. Do you require **Multilysis Services Ltd** to be appointed as Shareholder of the Company? Yes No

If Yes, then it is a prerequisite that Multilysis is appointed as Company's Secretary.

IF THE SHAREHOLDER IS A NATURAL PERSON, please provide 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;
4. CV;
5. Non-Criminal Record.

IF THE SHAREHOLDER IS A LEGAL PERSON/ENTITY, please provide 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** facility for the Company:

Yes No

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

Please indicate whether **Multilysis Services Ltd** is to be appointed as **Secretary** for the Company:

Yes No

If **No**, please provide details of the **Secretary**:

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

IF THE SECRETARY IS A NATURAL PERSON, please provide 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 provide 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. For due diligence purposes we need to identify a natural person as director. Do you require **Multilysis Services Ltd** to be appointed as Director of the Company? Yes No

*** Note- Multilysis can only accept the appointment of Director (nominee) if certain criteria are met and that includes the following:**

- i. An enhanced due diligence is effected relating to the Officer(s), Shareholder(s) and/or UBO(s);
- ii. No general Power of Attorney is provided- only specific (after reviewing the reason is required);
- iii. In case of a bank account, the UBO has only viewing access and the appointed Director(s) will be the signatory(ies) who will be acting on the UBO's written instructions (the client normally acts as a consultant or advisor to the director of the company). There would be an extra fee charged for effecting such payments;
- iv. All the contracts /agreements (to be signed upon UBO's written instructions) are to be reviewed and our charge will depend on the time spent as well as on the materiality of the amounts involved;
- v. The bookkeeping of the Company is undertaken by Multilysis;
- vi. It is a prerequisite that Multilysis is appointed as Company's Secretary.

If you wish to appoint your own Director, please provide the following information:

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

1. Certificate 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;
4. CV;
5. Non-Criminal Record.

IF THE DIRECTOR IS A LEGAL PERSON/ENTITY, please provide 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 &/or Shareholder and Director are provided:
 Note that all documents should either be in Greek or English language.

- | | | |
|---|------------------------------|-----------------------------|
| 1. Certified copy of Passport/ID | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 2. Original Bank Reference letter | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 3. Recent Utility Bill confirming residential address | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 4. Curriculum Vitae | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 5. Certified copies of Corporate Documents (Corporate Shareholders/Directors) | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 6. Non-Criminal Record | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

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 _____
 Email address _____
 Mail Forwarding _____

Do you require **Multilysis Services Ltd** to provide **virtual office facilities** to the Company?
(this includes Business Address, Mail Collection & Forwarding)

Yes No

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 recommend/suggest a local Auditor? Yes No

BANKING SERVICES

Do you require **Multilysis Services Ltd** to assist you in the opening of a bank account for the Company in Cyprus?

Yes No

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

Please note that the final decision of such opening entirely depends on the Compliance Dept. of each Banking Institution. Our relevant fees are payable in advance irrespective of Banks' final decision.

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

- i. A simple translation of M&A in English
- ii. A certified by the Registrar translation of M&A in English

APOSTILLED DOCUMENTS

Documents may be apostilled at an extra fee. If required, please specify which documents would need to be apostilled:

DECLARATION

I, the undersigned, being the UBO of (Company's name), requested 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 State 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 am/ I am not but I have been up until/ I am not and I have never been (delete as appropriate) **entrusted with a public prominent function**.
- g. I am/ I am not **related to any person** (delete as appropriate) **who holds a public function**.
- h. I am/ I am not but I have been up until/ I am not and I 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: _____

Multilysis will hold in strict confidence any confidential information obtained regarding you and your business and will not use or disclose any information obtained without your prior consent/permission except as may be reasonably necessary for the purposes of providing our services or as permitted or required by law or the relevant information is already in the public domain.