

FORM 2

SAINT VINCENT AND THE GRENADINES

INTERNATIONAL BUSINESS COMPANIES (AMENDMENT AND CONSOLIDATION)
ACT

[Section 11.]

Request for Name Search and Name Reservation

1. Name, address, telephone and fax number of person making the request:

Name:

Address:

Telephone:

Fax No.:

If person making the request is a registered agent, state name and licence number:

Name:

Licence number:

2. Proposed name or names in order of preference:

- | | |
|---------|----------|
| 1. | 6. |
| 2. | 7. |
| 3. | 8. |
| 4. | 9. |
| 5. | 10. |

3. Main types of business the company proposes to carry on:

.....
.....

4. Derivation of Name:

.....

5. First available name to be reserved:

Yes No

6. Purpose of Name Request: (*please check appropriate box*)

Incorporation

Continued company

Change of name

—state present name and company number

Amalgamation

—state names and company numbers of amalgamating companies

7. Provide any relevant information (for example, names of affiliated businesses,

consents
required from other companies):

FOR REGISTRY USE ONLY

Date Filed:

Received By:

- Yes, Name # appears to be available and is reserved for you
for seventy-two hours free of charge
- No, Name # is not available. Please see reasons below:
- Prohibited
- Too similar to attached names
- Obscene or on public grounds objectionable
- Other