

2005 JUL 11



Corporate Affairs Commission Abuja
 Treasury Dept
 SALEABLE
 4-111
 RECEIPT
 SIGN

FORM CAC 7

PARTICULARS OF DIRECTORS OR ANY CHANGE THERE IN

Pursuant to Section 292 (4)

RC NO.

NAME OF COMPANY:

PARTICULARS OF DIRECTORS

1.

Surname:					
Other Names:					
Nationality:		Age:		Year	
Residential Address (in case of a corporation the registered or principal office)					
		City:		State:	
Remarks:	APPOINTED:	RE-APPOINTED:	RESIGNED:	REMOVED:	

I consent to be a Director of the company

Signature: _____ Date: _____

2.

Surname:					
Other Names:					
Nationality:		Age:		Year	
Residential Address (in case of a corporation the registered or principal office)					
		City:		State:	
Remarks:	APPOINTED:	RE-APPOINTED:	RESIGNED:	REMOVED:	

I consent to be a Director of the company

Signature: _____ Date: _____

3.

Surname:					
Other Names:					
Nationality:		Age:		Year	
Residential Address (in case of a corporation the registered or principal office)					
		City:		State:	
Remarks:	APPOINTED:	RE-APPOINTED:	RESIGNED:	REMOVED:	

I consent to be a Director of the company

Signature: _____ Date: _____