SPECIMEN OF FORM TO BE COMPLETED BY ONE (1) PERSON



Registration of Business Names Act Chapter 317

Form I FORM OF APPLICATION FOR REGISTRATION

Name of Business: Far Out Production
General Nature of Business: Production of Plays
Principal Place of Business: Cherry Hill, Orange Grove, St. Thoma
Barbados
Name and Surname of Individual or Individuals IN FULL: Paul St. Elmo Lucas
Any former Christian or Surname: N/A
Present Nationality: Barbadian
Nationality of Origin: Barbadian
Address of each Individual: Cherry Hill, Orange Grove, St. Thomas
Barbados
Other Business Occupation (if any) of each Individual: Juterior Designer
Corporate Name of Corporation: N/A
Date of Commencement of Business (if after 15 th June, 1940): June 12, 1995
Signed: Signed:

N.B :. Please Place your Email Address, ID # and Contact Number(s) on the back of the form!!

SPECIMEN OF FORM TO BE COMPLETED BY TWO (2) PERSONS

form!!



Registration of Business Names Act Chapter 317

Form I FORM OF APPLICATION FOR REGISTRATION

General Nature of Business: Sale of General Merchandise Principal Place of Business: #1Newton Park, Christ Church Barbados Name and Surname of Individual or Individuals IN FULL: 1. Anna Claire Jones 2. Josef Ormani O'Riley Any former Christian or Surname: 1. Johnson 2.N/A Present Nationality: 1. Barbadian 2. American
Barbados Name and Surname of Individual or Individuals IN FULL: 1. Anna Claire Jones 2. Josef Ormani O'Riley Any former Christian or Surname: 1. Johnson 2.N/A
Name and Surname of Individual or Individuals IN FULL: 1. Anna Claire Jones 2. Josef Ormani O'Riley Any former Christian or Surname: 1. Johnson 2.N/A
2. Josef Ormani O'Riley Any former Christian or Surname: 1. Johnson 2.N/A
Any former Christian or Surname: 1. Johnson 2.N/A
Present Nationality: 1. Barbadian 2. American
Nationality of Origin: 1. Barbadian 2. American
Address of each Individual: 1. #2 Apple Terrace, Christ Church, Barbados 2. #34 Plumtree Heights, St. Philip, Barbado
Other Business Occupation (if any) of each Individual: 1. Teacher 2. N/A
Corporate Name of Corporation:
Date of Commencement of Business (if after 15 th June, 1940): June 12, 1989
(1) (2) Signed: Signed:

N.B:. Please Place your Email Address, ID # and Contact Number(s) on the back of the