



FORM 1.1

COMPANY INFORMATION DETAILS

Stamp	Date and Authorized Signatures of Member

Date:

Issuer Number:

Member Number:.....

Shareholder Number:.....

Company Name:	Category*:
Resident (Y/N):	Nationality:
Registration Number:	Date of Registration:
Place of Issue:	P.O. Box:
Street:	Building:
City:	Country:
Phone Number(s):	Fax Number:
E-Mail:	Capital in Shares:
Company Shareholder's (full name):	Quantity of Shares Owned:
**Please fill Form 1" New Shareholder Information" of all company shareholders.	*Company Type: 1=Holding, 2=Bank, 3=Financial Company , 4=Other Financial Company, 5=Non-Financial Company