

Form 20

Overseas Company

Notice of Change of Directors, Change in Place of Business,

Stamp with date received

Change in Postal Address, or Change in Persons

Authorized to Accept Service

(Section 160 of the Act)

[If there is insufficient space on this form to supply the information required, attach a separate sheet containing the information set out in the prescribed format.]

1. Name of overseas company: _____

2. Company number in the Solomon Islands: _____

3. Name the overseas company is using in the Solomon Islands if different from the name provided in line 1: _____

4. The company hereby provides notice of a change in a director(s):

Yes.....

No.....

If "yes" is ticked, provide the full name of each director ceasing to hold office, their residential and postal addresses, and the date on which such director ceased to hold office:

Director 1

Full Name

Residential Address

Postal Address

Date on which director ceased to hold office

Director 2

Full Name

Residential Address

Postal Address

Date on which director ceased to hold office

5. The company hereby provides notice of a change in the name, residential and/or postal address of an existing director(s):

Yes.....

No.....

If "yes" is ticked, provide the current full name of the director, their residential address and postal address, and then provide their new full name, new residential address and/or new postal address, as applicable:

Current Information for Director

Full Name

Residential Address

Postal Address

New Information for Director

Full Name

Residential Address

Postal Address

Date upon which the new information became effective: _____

6. If information was provided in either or both sections 4 or 5, then complete this section 6. Provide the full name of each director currently appointed to hold such office, their residential and postal address, and the date on which such director was appointed to hold office:

First Director

Full Name

Residential Address

Postal Address

Date on which first director
appointed to hold office

Male/Female*

Second Director

Full Name

Residential Address

Postal Address

Date on which second director
appointed to hold office

Male/Female*

Third Director

Full Name

Residential Address

Postal Address

Date on which third director
appointed to hold office

Male/Female*

Fourth Director

Full Name

Residential Address

Postal Address

Date on which fourth director
appointed to hold office

Male/Female*

Fifth Director

Full Name

Residential Address

Postal Address

Date on which fifth director
appointed to hold office

Male/Female*

**This gender information will not be publicly available on the register.*

6. The company hereby provides notice of a change of the address of its principal place of business in the Solomon Islands:

Yes.....

No.....

If "yes" is ticked, the new address of the principal place of business of the company in the Solomon Islands is:

7. The company hereby provides notice of a change the name of the person(s) and/or incorporated entity(ies) authorized to accept service of process on behalf of the company:

Yes.....

No.....

If "yes" is ticked, the new name and postal address of the person(s) and/or incorporated entity(ies) hereby authorized to accept service of process in the Solomon Islands on behalf of the overseas company:

Name	Postal Address	Residential or Business Address
_____	_____	_____
_____	_____	_____

In the case of a natural person, please give first name(s) followed by surname in BLOCK letters.

The residential or business address, as the case may be, must be a physical address in the Solomon Islands and not a PO Box or Private Bag address.

8. This Notice must be accompanied by the prescribed fee.

Signed by director or authorised person:

Name: _____ Signature: _____

Director or authorised person

Date: _____

Form 21

Annual Return of Overseas Company

(Section 161 of the Act)

<i>Stamp with date received</i>

[If there is insufficient space on the form to supply the information required, attach a separate sheet containing the information set out in the prescribed format.]

1. Name of overseas company: _____

2. Company number in the Solomon Islands: _____

3. Name the overseas company is using in the Solomon Islands if different from the name provided in line 1: _____

4. There are no changes to the existing overseas company information that is currently on the company register:

Yes..... No.....

If "yes" is ticked, proceed to section _____. If "No" is ticked, proceed to section 4 and complete the remainder of the sections.

5. Provide name, residential address and postal address of every director of the company as of the date of this Annual Return:

Name	Residential Address	Postal Address	Male	/	Female*
_____	_____	_____	<input type="checkbox"/>		<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>		<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>		<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>		<input type="checkbox"/>

*Please print first name followed by surname and print in BLOCK letters. *This gender information will not be publicly available on the register.*

6. The full address of the place of business in the Solomon Islands is:

[If there is more than one place of business, provide the address for the principal place of business.]

7. The postal address of the overseas company in the Solomon Islands is:

8. The following person(s) and/or incorporated entity(ies) is hereby authorized to accept service of process in the Solomon Islands on behalf of the overseas company:

Name	Postal Address	Residential or Business Address

In the case of a natural person, please give first name(s) followed by surname in BLOCK letters.

The residential or business address, as the case may be, must be a physical address in the Solomon Islands and not a PO Box or Private Bag address.

9. For easier communication with the Registry, please provide the following details (*Optional*)

Email address _____ Phone number and contact person _____

10. This Annual Return must be accompanied by the prescribed fee.

Signed by director or authorised person:

Name: _____ Signature: _____

Director or authorised person

Date: _____

Form 22

Application for Restoration of Overseas Company for

Failure to File Annual Return

(Sections 161(7) and 161(8) of the Act)

Stamp with date received

1. Name of overseas company: _____

2. Company number in the Solomon Islands: _____

3. Name the overseas company is using in the Solomon Islands if different from the name provided in section 1 above: _____

4. The company has been removed from the register for the failure to file past due annual returns.

Yes.....

No.....

5. The company hereby applies to be restored to the Solomon Islands company register.

Yes.....

No.....

6. All past due annual returns, along with all past due filing fees and late fees and penalties, if any, must accompany this Application for Restoration for Failure to File Annual Return. The Application must be submitted within seven (7) years of the date of removal from the register.

Signed by director or authorised person:

Name: _____

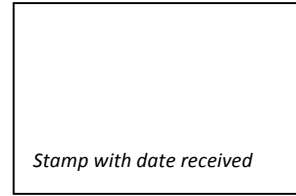
Signature: _____

Director or authorised person

Date: _____

Form 23

Notice of Overseas Company of Intent to
Cease Business in Solomon Islands
(Section 162 of the Act)



1. Name of overseas company: _____

2. Company number in the Solomon Islands: _____

3. Name the overseas company is using in the Solomon Islands if different from the name provided in section 1 above: _____

4. The company hereby request to be removed from the Solomon Islands company register on one of the following grounds (pick only one):

A. That the company has ceased to carry on business in the Solomon Islands and has arranged for the payment in full its liabilities to all its known creditors in the Solomon Islands:

Yes.....

No.....

B. The liquidation of the assets of the company in the Solomon Islands has been completed and a written notice to that effect from the liquidator is attached to this Notice.

Yes.....

No.....

5. Date on which the company requests the removal from the register to take effect: _____

6. This request must be accompanied by the prescribed fee, if applicable.

Signed by director or authorised person:

Name: _____

Signature: _____

Director or authorised person

Date: _____

Form 24

Application for Re-registration of a Company

(Section 210 of the Act)

<i>Stamp with date received</i>

[If there is insufficient space on this form to supply the information required, attach a separate sheet containing the information set out in the prescribed format.]

1. Name of existing company: _____

The name must be either be the name appearing on the certificate of incorporation or the current company name, as approved by the registrar. New company names will not be approved under the re-registration process.

2. Existing company number: _____

3. Original date of incorporation: _____

4. Place a tick in the appropriate box:

Private Company.....

Public Company.....

5. Place a tick in the appropriate box:

Model Rules for Private Company apply.....

Model Rules for Public Company apply.....

Rules differ from Model Rules.....

6. Provide name, residential address and postal address of every director of the company:

Name	Residential Address	Postal Address	Male	/	Female*
_____	_____	_____	<input type="checkbox"/>		<input type="checkbox"/>
Name	Residential Address	Postal Address	<input type="checkbox"/>		<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>		<input type="checkbox"/>
Name	Residential Address	Postal Address	<input type="checkbox"/>		<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>		<input type="checkbox"/>
Name	Residential Address	Postal Address	<input type="checkbox"/>		<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>		<input type="checkbox"/>

*Please print first name followed by surname and print in BLOCK letters. *This gender information will not be publicly available on the register.*

7. Has each person named above as a director consented to serve as a director for the company?

Yes..... No.....

8. Provide the full name of each shareholder of the company and the number of shares to be issued to each such shareholder

Name	Number of shares to be issued	Male / Female*	
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

Total Number of shares to be issued _____

*In the case of a natural person, please give first name(s) followed by surname in BLOCK letters. In the case of an incorporated entity, please give its full incorporated name in BLOCK letters. *This gender information will not be publicly available on the register.*

9. The registered office of the company is (this must not be a PO Box or Private Bag):

10. The postal address of the company is:

11. For easier communication with the Registry, please provide the following details (*Optional*)

Email address

Phone number and contact person

12. Please circle the main sector your company operates in (*Optional*):

Agriculture
Forestry
Fisheries
Mining
Manufacturing
Distribution
Tourism
Entertainment & Catering
Transportation
Telecommunication
Construction
Statutory Corporation
Financial Institutions
Professional & other services
Other

13. This Application must be accompanied by:

(i) a copy of the company's rules if different from the model rules; and

(ii) a copy of the existing company certificate of incorporation.

Signed by director or authorised person:

Name: _____

Signature: _____

Director or authorised person

Date: _____

Schedule 2

(Regulations 6 and 7)

Part 1

Table of fees payable to Registrar of Companies

	(SBDS\$)
For an application to register a company under section 6 of the Act	1,250.00
For registration of an annual return under section 119 of the Act	200
For registration of documents to effect an amalgamation under section 136 of the Act	250
For an application to restore a company to the register under section 140 of the Act	1000
For an application to register an overseas company under section 157 of the Act	2500
For registration of an annual return by an overseas company under section 161 of the Act	500

For an application to change the name of a company under section 11 of the Act	100
For re-registration of an existing company under section 210 of the Act	0
For certification of a copy of or extract from any document	150
For a copy of, or extract from, a document that is part of the register, in addition to any fee for certifying the copy or extract:-	
(a) if a photocopy is made by a member of the public using a photocopy machine provided for public use, for each A4 sheet	5
(b) if a photocopy is made by the registrar, for each A4 sheet.	5

Part 2

Penalties

	(SBDS\$)
Failure to deliver a document to the Registrar but providing such document within 25 working days after the time prescribed by the Act	100
Failure to deliver a document to the Registrar within 25 working days after the time prescribed by the Act	400

Schedule 3

(Regulation 10(1))

Financial Statements

Section 125, Companies Act 2009

[If there is insufficient space on the form to supply the information required, attach a separate sheet containing the information set out in the prescribed format.]

1. Name of existing company: _____

2. Existing company number: _____

3. Balance Sheet as at [date]

Current Assets

Bank

Inventory

Accounts receivable

Advances and loans to directors and
shareholders

Other current assets

Current Liabilities

Loans and overdrafts

Accounts payable

Advances and loans from directors
and shareholders

Tax payable

Other current liabilities

Net current assets

(liabilities)

Non current assets

Tangible assets –

Land and buildings

Motor vehicles

Plant and machinery

Advances and loans from directors

and shareholders

Investments

Intangible assets

Other non current assets

Non current liabilities

Term Loans

Advances and loans to directors and

shareholders

Other non current liabilities

Net assets (liabilities)

Shareholders funds

Note – The above information may be shown in a form that sets out assets alongside liabilities

4. Profit and loss statement (or income and expenditure statement)

for accounting period ending on [date]

Turnover

Other revenues

Expenses by material category in addition

to the specific separate disclosure of-

Depreciation

Amortisation

Directors and shareholders remuneration

Interest expense

Lease and rental costs

Net surplus (deficit) before taxation

Income Tax

Net surplus (deficit) after taxation

Shareholders funds at beginning of period

Dividends paid and payable

Other changes in shareholders funds

Shareholders funds at end of period

Other information

In addition to the particulars set out in the balance sheet and profit and loss statement (or income and expenditure statement) above, the financial statements must contain particulars as to the following

Accounting policies

The measurement system adopted (for example, historical cost or modified historical cost)

The accounting policies adopted in determining the amounts to be included in respect of items shown in the balance sheet and profit and loss statement (or income and expenditure statement)

Changes, if any, in accounting policies from the previous financial statements and the effect of any such changes

The basis of valuation when assets are carried at valuation (for example, directors' valuation, independent qualified valuation, stock exchange valuation)

Securities and guarantees given by the company in respect of liabilities, if material

Contingent liabilities, if material

Whether or not the financial statements have been audited

MADE AT HONIARA this day of 2010.

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PETER SHANEL AGOVAKA

MINISTER OF COMMERCE, INDUSTRY, LABOUR AND IMMIGRATION