

## THE AUTONOMOUS ISLAND OF MWALI (MOHÉLI) REGISTRAR OF COMPANIES

## TRUST LICENCE

## **CHANGE OR TERMINATION OF DIRECTOR**

Under the International Trust Act of 2001

Name of Trust Company:	
	Trust Licence No.:
Terminating Director Details	
Name :	Surname:
Resident Address:	
Date of Birth (DD/MM/YYYY):	Place of Birth:
Citizenship:	
Date of termination (DD/MM/YYYY):	

ABOVE DIRECTOR THIS DAY RESIGN FROM THE POSITION OF THE PRESIDENT OF THE TRUST COMPANY AND THE COMPANY APPOINT FOLLOWING NEW DIRECTOR:

## **New Director Details**

Name :	Surname:
Resident Address:	
Tel:	Fax:
Cellular:	E-mail:
Date of Birth (DD/MM/YYYY):	Place of Birth:
Citizenship:	
Personal ID No.:	Country of Issue:
Drivers Licence ID No.:	Country of Issue:
Passport No.:	Country of Issue:
Date of appointment (DD/MM/YYYY)	·
(Note: please attach to the application co	ppy of passport or Government ID)
Business reference	
Name of Company:	
Tel:	E-mail:
Banking reference	
Name of Bank:	
Address:	
Tal	E mail:

I/We applicants sworn and declare with full legal responsibility to the Mwali International Services Authority, Register of Companies and Offshore Banking Supervisory Authority, that all submited and filed information are true and correct and are aproved by the Board of Directors or shareholders meeting.			
Applicant Name and Surname:	Position in the Company:		
Applicant Signature:			
Date of Application:	Place of Application:		