

Cedar Rose International Services TM
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FULL NAME OF COMPANY

ALSO TRADING AS (Include any shortform names)

FULL ADDRESS OF COMPANY (Head Office)

P.O. BOX :
BUILDING NAME :
STREET NAME & NO. :
AREA :
TOWN / CODE :
COUNTRY :

TELEPHONE NUMBER(S)

FAX NUMBER(S)

TELEX NUMBER(S) / EMAIL ADDRESS (ES) / OTHER (please specify)

MANAGEMENT & SENIOR STAFF NAMES AND JOB TITLES

Number of Employees :

LEGAL STATUS OF COMPANY (Tick as appropriate)

Sole Proprietorship	0	Limited Liability Company	0	Other Form (Please specify) :
Partnership	0	Joint Stock Company	0	
Limited Partnership	0	Public Limited Liability Company	0	

NAMES OF OWNERS / SHAREHOLDERS

TITLE

PERCENTAGES HELD

REGISTRATION DETAILS (Please give figures in local currency)

Date of Registration :
Date of Establishment (if different) :
Commercial Registration Number :
Licence Number :
Authorised Capital :
Paid-Up Capital :

FINANCIAL DETAILS (Please give figures in local currency)

Total Capital Invested :
Total Value of Stock Held :
Total Value of Current Contracts :
Annual Import Value :

PLEASE ATTACH BALANCE SHEETS IF POSSIBLE & TICK BELOW

UNAUDITED 0 AUDITED 0 DRAFT 0 BALANCE SHEET ATTACHED DATED _____

RECENT PERFORMANCE (Please give most recent figures in local currency)

Sales Turnover	:	Year Ended :
	:	Year Ended :
Net Profit	:	Year Ended :
	:	Year Ended :

OPERATION AND BUSINESS ACTIVITIES (Tick as appropriate)

Importers	0	State countries imported from :
Exporters	0	State countries exported to:
Manufacturers	0	Production Capacity (No. of Units)
Commission Agents	0	Products / Services sold :
Manufacturer's Representatives	0	
Distributors	0	
Wholesalers	0	
Retailers	0	
Contractors	0	Client details :

PREMISES & FACILITIES (Tick as appropriate)

Owned	0	Retail Outlet	0 No.____ Size_____	Factory	0 No.____ Size_____	Owned Company Vehicles :
Rented	0	Warehouse	0 No.____ Size_____	Office	0 No.____ Size_____	
Leased	0	Cold Store	0 No.____ Size_____		0 No.____ Size_____	

BRANCH LOCATIONS (Address, Telephone & Fax Numbers)

SUBSIDIARIES / AFFILIATED / SISTER COMPANIES (Address, Telephone & Fax Numbers)

BANKERS (Branch Address, Telephone & Fax Numbers)

OVERSEAS SUPPLIERS / TRADE REFERENCES

Company Name	:	Company Name	:
Address	:	Address	:
Telephone No.	:	Telephone No.	:
Fax No.	:	Fax No.	:
Payment Method	:	Payment Method	:

PLEASE PROVIDE ANY FURTHER INFORMATION WHICH MAY BE RELEVANT

SIGNED _____ POSITION _____ DATE _____