

Company number

FORM No. 21

Zanzibar Business and Property Registrations Agency

FIRST SCHEDULE

Particulars for Registration of a Foreign Company, Change of Particulars and Annual Return

[Made under regulation 34]

To the Registrar of Companies

Name of company
(existing full name)

APPLICATION

Tracking number:

[Tracking number]

Application date and time:

[Application submitted]

APPLICANT

**National ID: {or} Zan ID:
{or} Passport number:**

[National ID] {or} [Zan ID] {or} [Passport number]

**Country of passport
issuance**

[Country of passport issuance]

Nationality:

[Nationality]

Name,
[First name] [Middle name] [Last name],
Gender, Date of birth
[Gender], [Date of birth]

Contacts:

[E-mail], [Phone number]

**Can this person update
data in ORS?**

[Can this person update data in ORS?]

**This person is empowered to assign persons
who can update data in ORS**

{Natural person}

CHANGES OF PARTICULARS

[Change type]

GENERAL INFORMATION

Company Name:

[Company Name]

Initial registration number:

[Initial registration number]

Initial registration date:

[Initial registration date]

Registration number:

[Registration number]

Registration date:

[Registration date]

Accounting date:

[Accounting date]

Principal place of business in Zanzibar:

[Region], [District], [Shehia], [Street],[Road], [Plot number],[Block number],[House number]

Contacts:

[E-mail], [Phone number]

Business activity:

[Name of activity], Main activity

COMPANY IN THE COUNTRY OF ORIGIN

Incorporation number in the country of origin:

[Incorporation number in country of origin]

Incorporation date in the country of origin:

[Incorporation date in country of origin]

Principal place of business in the country of origin:

[FOREIGN ADDRESS]

DIRECTORS IN THE COUNTRY OF ORIGIN [n]

National ID: {or} Passport number:

[National ID] {or} [Passport number]

Country of passport issuance

[Country of passport issuance]

Nationality:

[Nationality]

Name,
[First name] [Middle name] [Last name],

Gender, Date of birth
[Gender], [Date of birth]

Contacts:

[E-mail], [Phone number]

Country of residence:

[Country]

Residential address:

SECRETARY IN THE COUNTRY OF ORIGIN

National ID: {or} Passport number:

[National ID] {or} [Zan ID] {or} [Passport number]

Country of passport issuance

[Country of passport issuance]

Nationality:

[Nationality]

Name,
[First name] [Middle name] [Last name],

Gender, Date of birth
[Gender], [Date of birth]

Contacts:

[E-mail], [Phone number]

Country of residence:

[Country]

Residential address:

{Natural person}

{Natural person}

AUTHORISED PERSONS RESIDENT IN ZANZIBAR [n]

**National ID: {or} Zan ID:
{or} Passport number:**

[National ID] {or} [Zan ID] {or} [Passport number]

**Country of passport
issuance**

[Country of passport issuance]

Nationality:

[Nationality]

Name,
[First name] [Middle name] [Last name],

Gender, Date of birth
[Gender], [Date of birth]

Contacts:

[E-mail], [Phone number]

Residential address:

[Region], [District], [Shehia], [Street],[Road], [Plot number],[Block number],[House number]

Signature;

**Can this person update
data in ORS?**

[Can this person update data in ORS?]

**This person is empowered to assign persons
who can update data in ORS**

REPRESENTATIVE [n]

**National ID: {or} Zan ID:
{or} Passport number:**

[National ID] {or} [Zan ID] {or} [Passport number]

**Country of passport
issuance**

[Country of passport issuance]

Nationality:

[Nationality]

Name,
[First name] [Middle name] [Last name],

Gender, Date of birth
[Gender], [Date of birth]

Contacts:

[E-mail], [Phone number]

{Natural person}

{Natural person}

This person is empowered to assign persons who can update data in ORS

| |
|--|
| |
|--|

CHARGES IN ZANZIBAR

CHARGE [n]

Type of charge:

| |
|--|
| |
|--|

Date of creation of the charge:

| |
|--|
| |
|--|

Description of the instrument:

| |
|--|
| |
|--|

Amount secured:

| |
|--|
| |
|--|

Short particulars of the property mortgaged or charged

| |
|--|
| |
|--|

Particulars as to commission allowance or discount

| |
|--|
| |
|--|

Persons entitled to charge

| |
|--|
| |
|--|

LIQUIDATORS

LIQUIDATOR [n]

National ID: {or} Zan ID:

| |
|--|
| |
|--|

[National ID] {or} [Zan ID]

Nationality:

| |
|--|
| |
|--|

[Nationality]

Name,

[First name] [Middle name] [Last name],

| |
|--|
| |
|--|

Gender, Date of birth

[Gender], [Date of birth]

| |
|--|
| |
|--|

Contacts:

| |
|--|
| |
|--|

[E-mail], [Phone number]

Country of residence:

| |
|--|
| |
|--|

Residential address:

| |
|--|
| |
|--|

[Region], [District], [Ward/Shehia], [Street],[Road], [Plot number],[Block number],[House number]

**RECEIVER/MANAGER
RECEIVER/MANAGER [n]**

National ID: {or} Zan ID:

[National ID] {or} [Zan ID]

Nationality:

[Nationality]

Name,

[First name] [Middle name] [Last name],

Gender, Date of birth

[Gender], [Date of birth]

Contacts:

[E-mail], [Phone number]

Country of residence:

Residential address:

[Region], [District], [Ward/Shehia], [Street],[Road], [Plot number],[Block number],[House number]