

# CORPORATE AFFAIRS COMMISSION



812208  
OFFICE  
250:00

## CAC/BN/I APPLICATION FOR REGISTRATION OF BUSINESS NAME Pursuant to Section 657

Reg. No.

A. Name of Business:

B. General Nature of Business:

C. Full Address of Principal Place of Business:

D. Full Address of Branch(es) (if any):

E. Particulars of Proprietors (other than corporations):

1. Name:		AGBEBAKU GABRIEL OHIWERE	
Any Former Name or Surname:			
Sex:	MALE	Age:	ADULT
Nationality:		NIGERIAN	
Residential Address:		3, ENITAN AYORINDE CLOSE AWOYAYA,	
City:		LAGOS	State:
Occupation:		ENGINEER	E-mail:
			gabrielagbebaku

CORPORATE AFFAIRS COMMISSION  
YABA OFFICE  
C.T.C- BUSINESS NAME  
03 AUG 2016  
SIGN



Signature:

Date: 04/07/16

2. Name:			
Any Former Name or Surname:			
Sex:		Age:	
Nationality:		Any Former Nationality	
Residential Address:			
City:			State:
P.O. Box:		E-mail:	
		Tel. No.:	

Signature: \_\_\_\_\_

Date: \_\_\_\_\_