

# CORPORATE AFFAIRS COMMISSION

(Established under The Companies and Allied Matters Act 1990)

CORPORATE AFFAIRS COMMISSION  
ORIGIN OFFICE  
1500:00



105620

PLOT 565, NDOLA SQUARE, WUSE ZONE 5, ABUJA

FORM CAC 7

## PARTICULARS OF DIRECTORS OR ANY CHANGE THEREIN

Pursuant to Section 292(4)

RC NO.

NAME OF COMPANY

FYNMETRIC TECHNOLOGIES LIMITED

### PARTICULARS OF DIRECTORS

1.

Surname:	ABULARIN		
Other Names:	ADOLADE JUSTIN		
Nationality:	AFRICAN	Age:	ADULT
Residential Address (in case of a corporation the registered or principal office):	25 TIAMITY STREET IKOTUN		
City:	ECBC	State:	LAGOS
Remarks:	APPOINTED: <input checked="" type="checkbox"/>	RE-APPOINTED: <input type="checkbox"/>	RESIGNED: <input type="checkbox"/>

I consent to be a Director of the Company

Signature: A. Abularin

Date: 31/05/11

2.

Surname:	ABULARIN		
Other Names:	ROSEMARY		
Nationality:	AFRICAN	Age:	ADULT
Residential Address (in case of a corporation the registered or principal office):	25 TIAMITY STREET IKOTUN		
City:	ECBC	State:	LAGOS
Remarks:	APPOINTED: <input checked="" type="checkbox"/>	RE-APPOINTED: <input type="checkbox"/>	RESIGNED: <input type="checkbox"/>

I consent to be a Director of the Company

Signature: A. Rosemary

Date: 31/05/11

3.

Surname:			
Other Names:			
Nationality:		Age:	
Residential Address (in case of a corporation the registered or principal office):			
City:		State:	
Remarks:	APPOINTED: <input type="checkbox"/>	RE-APPOINTED: <input type="checkbox"/>	RESIGNED: <input type="checkbox"/>

I consent to be a Director of the Company

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

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

4.

Surname:					
Other Names:					
Nationality				Age:	Years
Residential Address (in case of a corporation the registered or principal office)					
	City:		State:		
Remarks:	APPOINTED:	RE-APPOINTED:	RESIGNED:	REMOVED:	

I consent to be a Director of the Company

Signature \_\_\_\_\_

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

5.

Surname:					
Other Names:					
Nationality				Age:	Years
Residential Address (in case of a corporation the registered or principal office)					
	City:		State:		
Remarks:	APPOINTED:	RE-APPOINTED:	RESIGNED:	REMOVED:	

I consent to be a Director of the Company

Signature \_\_\_\_\_

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

Note:

"Directors include any person who occupies the position of a director by whatever name called. A body corporate should be represented by a natural person, this should be indicated. The name of the body corporate should be written in space provided for surname while the name of the natural person is given in the spaces provided for other names. The nationality and the residential address and signature of the natural person is thereafter provided in the space required."

Dated

3rd 13 JUN 2011 day of JUNE 200 4

A. [Signature] Name: A. Rosemary  
 Designation: Director  
 Signature: Director

Note:

If the space provided in the forms is insufficient, particulars of other Director should be listed on the particulars of Directors continuation sheet attached to this form.

Presented for filling by:

NAME:	DATE ADUYA	ACCR. NO.	NBA/IND/15300
ADDRESS:	C/O SIMMY ABIN F.P. COMPLEX, TUGATA, DAVAO	E-MAIL:	ABIN.SIMMY@TNT.com
TELEPHONE NO.	080 37748268	DATE:	3/6/11

**IMPORTANT**

All names of Directors should be provided in full. Abbreviation or initials are not acceptable



# CORPORATE AFFAIRS COMMISSION

(Established under The Companies and Allied Matters Act 1990)

PLOT 565, NDOLA SQUARE, WUSE ZONE 5, ABUJA



FORM CAC 2



## STATEMENT OF SHARE CAPITAL AND RETURN OF ALLOTMENT OF SHARES

Pursuant to Section 35(2)(d) of the Companies and Allied Matters Act 1990

RC NO.  

NAME OF COMPANY

TUNAIETIC TALKING GOS LIMITED

### A. STATEMENT OF SHARE CAPITAL

THE NOMINAL SHARE CAPITAL OF THE ABOVE NAMED COMPANY IS:

ONE MILLION NAIRA

N 1,000,000

AMOUNT IN WORDS

DIVIDED INTO

1,000,000

OF N

THE WHOLE INVESTMENT IS IN THE FORM OF ONE SHARE EACH

### B. RETURN OF ALLOTMENT OF SHARES

Number of shares allotted payable in cash:

Nominal amount of shares so allotted:

Amount paid or due and payable on each share:

Number of shares allotted for consideration other than

Amount to be treated as paid on each such:

The consideration for which such shares have been allotted is as follows:

800,000
N 800,000

THE WITHIN INVESTMENT IS IN THE FORM OF ONE SHARE EACH  
STAMP DUTIES CHARGEABLE WITH  
DUTY OF 7,573  
AND THE DUTY THEREON HAS BEEN  
PAID ACCORDINGLY  
COMMISSIONER OF STAMP DUTIES

Dated this 15

day of JUNE

20011



A. [Signature]  
Director

NAME AND ADDRESS OF SHAREHOLDERS				No Of Shares Alloted	Type of Shares
<b>1.</b>					
Name:	ADOLARIN, MURGLADE JUSTIN			600,000	ORDINARY
Address:	28 TIAMITY STREET				
City:	IKOTUN - EGBE	State:	LAGOS		

<b>2.</b>					
Name:	AGOLARIN, ROSEMARY			200,000	ORDINARY
Address:	28 TIAMITY STREET				
City:	IKOTUN	State:	LAGOS		

<b>3.</b>					
Name:					
Address:					
City:		State:			

<b>4.</b>					
Name:					
Address:					
City:		State:			

<b>5.</b>					
Name:					
Address:					
City:		State:			

<b>6.</b>					
Name:					
Address:					
City:		State:			

SIGNATURE

*[Handwritten Signature]*

(Director)

Presented for filling by:

NAME:	ADEYA, DAPU	ACCR NO.	NEA/IND/15360
ADDRESS:	41 JUMIA ABIA TIC COMPLEX, TUPATA, USHAKI	E-MAIL:	AGSIATIMMY@MATTUO.COM
TELEPHONE NO:	08037748268	DATE	1/6/11