AFFAIRS COMMISSION

#W250 - 00



INTERNAL LUDIT ommission. AUDITORS

APPLICATION FOR REGISTRATION OF BUSINESS WANTE.

Pursuant to Section 657 Reg. No: A. Name of Business: OBAGIGA NIGERIA ENTERPRISES B. General Nature of Business: SALE AND SERVICE OF AUTHO BATTERY AND ALLIED PRODUCTS SALE, SERVICE AND INSTALLATION OF UPS AND INVERTER POWER BACK-UP Full Address of Principal Place of Business: C. CORPORATE AFFAIRS COMMISSION KILOMETER 8, IJOKO ROAD, OTTA, OGUN STATE Full Address of Branch(es) (if any): D. Partculars of Proprietors (other than Corporations): E. REGISTRAR OF EUSINESS NA OLUWAFEMI FAITH ABIODUN Name: (PASTOR) Any Former Furname or Surname: Age: 46/412/55 Tel. No.: MALE 08034705272 Nationality: NIGERIAN Any Former Nationality Residential KM 8, IJOKO ROAD, OTTA Address City: OTTA State: OGUN Occupation: BUSINESS E-mail: Signature: 09/ 2. Date: Name: OLUWAFEMI GRACE OMOTAYO (DECONESS) Any Former Furname or Surname: FEMALEAge: 23/7/59 Occupation: BUSINESS Nationality: NIGERIAN Any Former Nationality Residential KM 8, IJOKO ROAD, OTTA Address

City: OTTA State: OGUN P.O. E-mail Tel. Box 08034420707

Signature:

Date: 09/06/2016

	Address:					
Atto	estation of Margistro minor:	ate, Legal Practtioner or F	Police Officer of the ra	nk of ASP and al	200ve where and 6.1	
Nar	ne & Tel. No.:	•			ove where one of the pr	oprietors
Add	dress:					
Sign	nature, Designation	& Date:				
Atte	station of Director o	or Secretary of the Compan				
Nam	ne & Tel. No.:		iy where one of the pro	oprietors is a con	прапу:	
Add	ress:			ľ		
Sign	ature, Designation &	z Date:			COMPORATE AFFAIRS	COMMISSIC
G.	Date of Comme	ncement of Business:			ALAUSA	e Cops
F.	Attestation:			4	ARAE JUN 21	
	I/We, the undersig are, to the best of whenever any char	ned, being proprietor(s) of the fine of th	the above named busined lief, correct and I/we use of them other than the	ss name hereby cel ndertake to notify	IGN The foregoing paths the Registrar of Business	diculars 5
	Proprietor		inut the	age of any of the p	al Cal	, ivames
			Beofre Me		Proprietor	
Note:	If there is inques		Commissioner of Oat	hs	,	
	out in the prescribed fo	space on the form to provide any	y information required, plea	ase attach a seperate s	theet containing the informati	on set
Presen	ted for filing by:					
Name:	ADEKUNLE AF	RABAMBI & CO				
Address	171, ABEC	OKUTA EXPRESS WA	Accreditation No. (i	f applicable): IC	CAN/FIRM/361	
Tel. No						
	adekun	learabambi_co y	Signature & D	Pate:	09/06/2010	5