**FEDERATED STATES OF MICRONESIA**

DEPARTMENT OF JUSTICE

**CORPORATE REGISTRATION DIVISION**

**P.O. Box PS-105 Palikir, Pohnpei FSM 96941**

**Phone: (691) 320-2608/5852 Fax (691) 320-2234**

**MAJOR CORPORATION ANNUAL REPORT**

(due sixty days after fiscal year-end)

1. Name of Business:

Address:

Telephone No: Fax:

1. Contact Person (whether in FSM or elsewhere):

Position:

1. Type of Business:
2. Did you file an ***“Annual Report”*** for last year? Yes ( ) No ( )

If **“No”,** explain why:

1. Name and addresses of your Banks:
2. Date of Incorporation (date Articles and Bylaws stamped):
3. Names and Addresses of all Directors:

a.)

b.)

c.)

d.)

e.)

f.)

g.)

h.)

i.)

j.)

1. Officers:

President

Vice President

Secretary

Treasurer

1. Capitalization:

a.) Authorized number of shares:

b.) Issued number of shares:

1. List of Names, Addresses & Number of Shares for each Shareholder (attach list if needed):

Name and Address Number of Shares

1)

2)

3)

4)

5)

Total issued and outstanding shares:

I CERTIFY THAT ALL OF THE ANSWERS MADE IN THIS STATEMENT ARE TRUE, COMPLETE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

Signature: By (print name): Title or Office held: Date: