

REINSTATEMENT APPLICATION

Please Print Clearly

Take notice that a reinstatement application will be made to the registrar of companies to reinstate

Registration # _____, as an extraprovincial company in BC.

Dated at _____, BC, this _____ day of _____, 2010.

Name of Person Making Application _____

Relationship to Company (i.e. Officer, Director, Shareholder) _____

Payment for this ad is \$50.05 (\$47.67 plus GST). Company Cheques or Money Orders should be made out to the "Minister of Finance" and mailed to the address following. Note that we do not accept Personal Cheques.

To submit form please fax to 250 387-1120 or mail to:

BC Gazette
PO Box 9452 Stn Prov Govt
Victoria BC V8W 9V7
2nd Floor, 563 Superior St (for Courier)

If you have any questions, please do not hesitate to call the BC Gazette @ 1 800 663-6105.

Your Name _____

Company (if applicable) _____

Address _____

City _____ Province _____ Postal Code _____

Phone Numbers(s) _____

Cardholder's Name _____

Visa, AMEX or MasterCard # _____ Expiry ____ / ____