



Accounting & Tax Services

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INCORPORATION FORM

(Please Print)

Incorporation Name: (If numbered corporation, please indicate "Numbered".)

Choice#1

Choice#2

Choice#3

Specify ending as(circle one): "Inc." "Ltd." "Corp." "Incorporated" "Limited" "Corporation"

Business Address:

Address1

Address2

City Province PostalCode -

Telephone# - - Fax# - -

Business Activity (Specify): _____

First Director:

Last Name

Given Name Mid Init. SIN# - -

Address

City Province PostalCode -

Home # - - Bus. # - -

Cell # - - Pager # - -

Signature: _____

Second Director:

Last Name

Given Name Mid Init. SIN# - -

Address

City Province PostalCode -

Home # - - Bus. # - -

Cell # - - Pager # - -

Signature: _____
