NEW CORPORATION QUESTIONNAIRE

1.	. (a) Proposed Corporate Name:							
		Alternate Name(s):						
	(b)	Do you plan to conduct business under a different name?						
		☐ Yes ☐ No						
		If yes, a Fictitious Business Name Sta	tement will need to be filed and published.					
	Please state the fictitious name and each county where you content							
		Fictitious Name:						
	County(ies):							
2.	Offic	fice Locations:						
	(a)	Principal Office						
		Address:						
		City:	County:					
		State Zip:						
		Telephone Number: ()	Fax Number: ()					
		Home Telephone Number: ()						
3.	Type	of Business:						
4.	Num	ber of Initial Directors:						
5.	Names of Initial Directors:							
	Director:							
	Director:							
	Director							

]	President:								
(Chief Financial Officer: Secretary: Number of Shares of Common Stock:								
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	Please list names of Shareholders below and their spouses. Please list social security								
1	numbers of everyone.		_						
Name	of Shareholder	Number	Consideration Paid for Shares		Social Security Number				
		of Shares							
Spouse	e's Name			Social Seco	urity Number				
).]	Do you need a Buy-Sell Agreer	ment?							

6.

Names of Initial Officers:

10.	Accounting Information:								
	(a)) Fiscal Year for Corporation:							
		Date Begi	inning:	Date Ending:					
	(b) Method of Accounting for Corporation:								
		□Cash	☐ Accrual						
11.	Accountant for the Business:								
	Name:								
		Address:							
		City:			State	Zip:			
		Telephone	e: <u>Res. ()</u>		Bus. ()				
12.	Bank:								
	Name:				Branch:				
	*Aut	thorized Sign	nature(s) or With	drawal Authorizati	on:				
13.	INTERNAL REVENUE SERVICE Employer I.D. Number Information:								
	(a)	Approximate peak number of employees anticipated in the next twelve (12)							
	<i>a</i> >	months:	· · · · · · · · · · · · · · · · · · ·						
	(b)	First date wages will be paid to employees:							
	(c) To whom do you sell most of your products or services? ☐ Business establishments ☐ General Public								
				☐General Public					
4.4	ъ.	Other (Sp							
14.	Date of Annual Directors and Shareholders Meeting:								
15.	Tax Treatment:								
	Do you wish to elect Subchapter S status for federal taxation purposes?								
		Yes	□No						