

Incorporation WORKSHEET

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<p>Corporate Names:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="height: 20px;">1)</td></tr> <tr><td style="height: 20px;">2)</td></tr> <tr><td style="height: 20px;">3)</td></tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 150px;">Address:</td><td></td></tr> <tr><td>City, St, Zip:</td><td></td></tr> </table> <table border="1" style="width: 100%; border-collapse: collapse; background-color: #cccccc; text-align: center;"> <tr><th colspan="2">Officers</th></tr> <tr><td style="width: 100px;">CEO</td><td></td></tr> <tr><td>CFO</td><td></td></tr> <tr><td>Secretary</td><td></td></tr> <tr><td> </td><td></td></tr> </table> <table border="1" style="width: 100%; border-collapse: collapse; background-color: #cccccc; text-align: center;"> <tr><th colspan="2">Board of Directors</th></tr> <tr><td style="width: 100px;">Chairman</td><td></td></tr> <tr><td>Director 2</td><td></td></tr> <tr><td>Director 3</td><td></td></tr> <tr><td> </td><td></td></tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="height: 20px;">Business Desc:</td></tr> <tr><td style="height: 20px;"> </td></tr> </table>	1)	2)	3)	Address:		City, St, Zip:		Officers		CEO		CFO		Secretary				Board of Directors		Chairman		Director 2		Director 3				Business Desc:		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 100px;">First Name:</td><td></td></tr> <tr><td>MI:</td><td></td></tr> <tr><td>Last Name:</td><td></td></tr> <tr><td>Address:</td><td></td></tr> <tr><td>City, St, Zip:</td><td></td></tr> <tr><td>SSN:</td><td></td></tr> <tr><td>DOB:</td><td></td></tr> <tr><td>Phone:</td><td></td></tr> <tr><td>email:</td><td></td></tr> <tr><td>Investment:</td><td></td></tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 100px;">First Name:</td><td></td></tr> <tr><td>MI:</td><td></td></tr> <tr><td>Last Name:</td><td></td></tr> <tr><td>Address:</td><td></td></tr> <tr><td>City, St, Zip:</td><td></td></tr> <tr><td>SSN:</td><td></td></tr> <tr><td>DOB:</td><td></td></tr> <tr><td>Phone:</td><td></td></tr> <tr><td>email:</td><td></td></tr> <tr><td>Investment:</td><td></td></tr> </table>	First Name:		MI:		Last Name:		Address:		City, St, Zip:		SSN:		DOB:		Phone:		email:		Investment:		First Name:		MI:		Last Name:		Address:		City, St, Zip:		SSN:		DOB:		Phone:		email:		Investment:		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 100px;">First Name:</td><td></td></tr> <tr><td>MI:</td><td></td></tr> <tr><td>Last Name:</td><td></td></tr> <tr><td>Address:</td><td></td></tr> <tr><td>City, St, Zip:</td><td></td></tr> <tr><td>SSN:</td><td></td></tr> <tr><td>DOB:</td><td></td></tr> <tr><td>Phone:</td><td></td></tr> <tr><td>email:</td><td></td></tr> <tr><td>Investment:</td><td></td></tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 100px;">First Name:</td><td></td></tr> <tr><td>MI:</td><td></td></tr> <tr><td>Last Name:</td><td></td></tr> <tr><td>Address:</td><td></td></tr> <tr><td>City, St, Zip:</td><td></td></tr> <tr><td>SSN:</td><td></td></tr> <tr><td>DOB:</td><td></td></tr> <tr><td>Phone:</td><td></td></tr> <tr><td>email:</td><td></td></tr> <tr><td>Investment:</td><td></td></tr> </table>	First Name:		MI:		Last Name:		Address:		City, St, Zip:		SSN:		DOB:		Phone:		email:		Investment:		First Name:		MI:		Last Name:		Address:		City, St, Zip:		SSN:		DOB:		Phone:		email:		Investment:	
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