Swedish Credit Union Questionaire

| PRINT, COMPLETE IN BLOCK CAPITALS AND RETURN BY FACSIMILE OR EMAIL | | | |
|--|-------|--|--|
| То: | From: | | |
| Avia Business Services Ltd. | | | |
| 1534 Plaza Lane #121 | | | |
| Burlingame, CA 94010-3204 | | | |
| USA | | | |
| Fax: +1-775-295-1802 | | | |
| Phone: +1-650-292-0792 | | | |
| email: <u>avia@aviabiz.com</u> | | | |

| Proposed Company Name: | | | | |
|--|--------------------------------------|--------|--|--|
| First choice | | | | |
| Alternative one | | | | |
| Alternative two | | | | |
| Alternative three | | | | |
| Alternative four | | | | |
| | Question | Answer | | |
| Will the business require | a mail forwarding service in Sweden? | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Is a voice mail in Sweden | required? | | | |
| Is fax number in Sweden with forwarding of faxes required? | | | | |
| Is phone number in Sweden with forwarding of calls required? | | | | |
| Is TELEX number in Sweden required? | | | | |
| Do you require courier delivery? (UPS, FEDEX, DHL) | | | | |
| Do you require bank account for CU in Sweden? We can open it at two different banks. | | | | |
| Do you require bank acco | ount in any other location? | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

How many directors will company have?

Proposed Company Activities:

Why do you want to establish this company?

What activity will the company undertake?

In which countries will the company operate?

What is the estimated annual turnover?

How are you funding the set-up of the company and what is the source of these funds?

| ABOUT YOU – MANDATORY | | | | | |
|--|--------------|----------|---------|---|--|
| Will you be an owner of the proposed company? | | | | | |
| If you are an owner, % of the shares w | ill you own? | | | % | |
| Will you be a director of the proposed | company? | | | | |
| What is your name? | | | | | |
| Address | | Delivery | address | | |
| | | | | | |
| Email | | | | | |
| Mobile telephone | | | | | |
| Telephone | | | | | |
| Facsimile | | | | | |
| Nationality | | | | | |
| Occupation | | | | | |
| Passport No. & place of issue | | | | | |
| Marital status | | | | | |
| Date and place of birth | | | | | |
| Do you own any business? If yes, please provide details. (Name, address, incorpoation date, registration number, place of incorporation) | | | | | |
| What is the source of funds? | | | | | |
| Have you at any time been convicted of any offence? | | | | | |
| In carrying out your duties will you be acting on the instructions of any other person or persons? | | | | | |
| Please provide bank reference details Please provide professional reference details | | | | | |
| | | | | | |

| ABOUT OTHER OWNER(S) OR DIRECTOR(S) OR SECRETARY(S)– OPTIONAL (You must fill this for all the owners, directors and secretaries.) | | | | |
|---|---|---------------------------|--|--|
| Will you be an owner of the propos | sed company? | | | |
| If you are an owner, % of the share | es will you own? | % | | |
| Will you be a director of the propos | sed company? | | | |
| Will you be a secretary of the prop | osed company? | | | |
| What is your name? | | | | |
| Address | · · · | | | |
| | | | | |
| Email | | | | |
| Mobile telephone | | | | |
| Telephone | | | | |
| Facsimile | | | | |
| Nationality | | | | |
| Occupation | | | | |
| Passport No. & place of issue | | | | |
| Marital status | | | | |
| Date and place of birth | | | | |
| place of incorporation) | please provide details. (Name, address, incorpoation da | ate, registration number, | | |
| What is the source of funds? | | | | |
| Have you at any time been convicted of any offence? | | | | |
| In carrying out your duties will you be acting on the instructions of any other person or persons? | | | | |
| Please provide bank reference det Please provide professional refere | | | | |
| | | | | |

| ABOUT OTHER OWNER(S) OR DIRECTOR(S) OR SECRETARY(S)– OPTIONAL (You must fill this for all the owners, directors and secretaries.) | | | | |
|---|---|--------------------------|--|--|
| Will you be an owner of the propos | sed company? | | | |
| If you are an owner, % of the share | es will you own? | % | | |
| Will you be a director of the propos | sed company? | | | |
| Will you be a secretary of the prop | osed company? | | | |
| What is your name? | | | | |
| Address | | | | |
| | | | | |
| Email | | | | |
| Mobile telephone | | | | |
| Telephone | | | | |
| Facsimile | | | | |
| Nationality | | | | |
| Occupation | | | | |
| Passport No. & place of issue | | | | |
| Marital status | | | | |
| Date and place of birth | | | | |
| place of incorporation) | please provide details. (Name, address, incorpoation da | te, registration number, | | |
| What is the source of funds? | | | | |
| Have you at any time been convicted of any offence? | | | | |
| In carrying out your duties will you be acting on the instructions of any other person or persons? | | | | |
| Please provide bank reference det | ails | | | |
| Please provide professional reference details | | | | |

OPTIONAL – Is there any additional information you would like to supply? Do you have any questions?

PLACE AND TODAY'S DATE

Terms and Conditions / Declaration

I/we, the person (s) whose names is/are the one that appears on the bottom, by means of this document I/we declare and with my own signature confirm:

- that all the information I/we have provided in this form is true and correct;
- I/we include a notarised copies of my/our passports;
- That the company will not be used for money laundering, child pornography, prostitution, terrorist activities, receiving proceeds of drug trafficking, trading in arms, munitions or other weapons or for any purpose which is illegal under the law of the place of incorporation or management;
- I/we will at all times irrevocably and unconditionally hold harmless and indemnify **Avia and Slogold Group of Companies** and any parent, subsidiary or affiliate thereof and their directors, partners, officers and employees against all proceedings, suits, damages, fines, expenses, penalties and liabilities arising or brought against any of them by reason of any breach of the above declarations or the provision of the Company and/or the Services to me or my use thereof;

Name and Signatures of all the persons named in this questionaire