

**NUNAVIK INUIT BUSINESS DIRECTORY  
REGISTRATION FORM**

**ANNEX 2: SHARE-CAPITAL CORPORATION**

**Specific information and documentation required**

*( Please note that additional documents may be required to determine the Nunavik Inuit status of your business – any delay or failure in providing the requested information may result in the delay or rejection of your application.)*

**If your business is a Share Capital Corporation:**

- a)** Provide the following for each shareholder (use separate sheet if needed):

Shareholder no. 1

Full name

Address

Shareholder no. 2

Full name

Address

Beneficiary number (if applicable)

Class and no. of shares held

Class and no. of shares held

Beneficiary number (if applicable)

Class and no. of shares held

Class and no. of shares held

Shareholder no. 3

Full name

Address

Shareholder no. 4

Full name

Address

Beneficiary number (if applicable)

Class and no. of shares held

Class and no. of shares held

Beneficiary number (if applicable)

Class and no. of shares held

Class and no. of shares held

**NUNAVIK INUIT BUSINESS DIRECTORY  
REGISTRATION FORM**

**b) Description of Share capital:**

Provide the total number of issued and outstanding shares of each class (voting and non-voting) issued by the corporation (use separate sheet if additional space is needed):

Class of shares

Total number of shares issued and outstanding in this class

Voting rights                      Yes                      No

Class of shares

Total number of shares issued and outstanding in this class

Voting rights                      Yes                      No

Class of shares

Total number of shares issued and outstanding in this class

Voting rights                      Yes                      No

**c) Provide a copy of the current shareholders registry.**

**d) Provide a copy of the current shareholders agreement.**

**e) Provide a copy of all incorporation documents, including the Certificate of Incorporation, Articles of Incorporation, Memoranda of Association or Letters Patent of Incorporation, as applicable.**

**f) The name and, if applicable, the JBNQA beneficiary number of each officer of the corporation (use separate sheet if additional space is needed):**

Name	Title
Beneficiary no.	

Name	Title
Beneficiary no.	

Name	Title
Beneficiary no.	

Name	Title
Beneficiary no.	

**NUNAVIK INUIT BUSINESS DIRECTORY  
REGISTRATION FORM**

- g) The name and, if applicable, the JBNQA beneficiary number of each director of the corporation (use separate sheet if additional space is needed):

Name Title  
Beneficiary no.

Name Title  
Beneficiary no.

Name Title  
Beneficiary no.

Name Title  
Beneficiary no.

Name Title  
Beneficiary no.

Name Title  
Beneficiary no.

- h) Ensure that the records available for consultation on the websites of the [Registraire aux Entreprises \(http://www.registreentreprises.gouv.qc.ca/en/default.aspx\)](http://www.registreentreprises.gouv.qc.ca/en/default.aspx) and, if applicable, of the [CorporationsCanada \(https://www.ic.gc.ca/app/scr/cc/CorporationsCanada/fdr1CrpSrch.html?lcale=en\\_CA\)](https://www.ic.gc.ca/app/scr/cc/CorporationsCanada/fdr1CrpSrch.html?locale=en_CA) are up to date and that the information contained therein matches the information provided with the present application.

**IMPORTANT NOTE: If any of the shareholders listed in section a) are corporations, other than landholding corporations, the applicant should provide the information requested at sections a) b) c) d) e) for each corporate shareholder.**

I am duly authorized to submit the present application for and on behalf of the applicant business.

I have read the information and documentation submitted with the present application and declare that they are true, accurate and complete. I also undertake to inform the Nunavik Inuit Business Registry in writing of any change that could affect the Inuit status of the subject business.

Name Title

Signature Date