

GOVERNMENT GAZETTE

OF THE

REPUBLIC OF NAMIBIA

N\$6.00

WINDHOEK - 1 September 2016

No. 6113

Page

1

CONTENTS

GOVERNMENT NOTICE

No. 207 Amendment of Companies Administrative Regulations: Companies Act, 2004

Government Notice

MINISTRY OF INDUSTRIALISATION, TRADE AND SME DEVELOPMENT

No. 207

AMENDMENT OF COMPANIES ADMINISTRATIVE REGULATIONS: COMPANIES ACT, 2004

Under section 13 of the Companies Act, 2004 (Act No. 28 of 2004), I have amended the regulations set out in the Schedule.

I. NGATJIZEKO MINISTER OF INDUSTRIALISATION, TRADE AND SME DEVELOPMENT

Windhoek, 1 August 2016

SCHEDULE

Definitions

1. In these regulations the "Regulations" means the Companies Administrative Regulations published under Government Notice No. 173 of 10 August 2010.

Amendment of Annexure 3 to Regulations

2. Annexure 3 to the Regulations is amended by the substitution for Form CM 23 of the following Form:

2016

-	~
Form	CM23

Revenue stamp /revenue franking

REPUBLIC OF NAMIBIA

COMPANIES ACT 2004 (Sections 181, 182 and 336) (Regulations 39 and 40))

And The Financial Intelligence Act 2012

(Section 4, Regulation 2)

ANNUAL RETURN

Name and postal address of Company 		PART A			machine impression N\$100-00 plus annual duty under section 182 and 183 and Regulation 40
Name And Number Of Holding Company					Registration Number of Company
	Da	y Month	Year		For office use
(a) Annual return for calendar year					DATA PROCESSING
(b) Date incorporated/registered/establ	lished				1 <u>Recorded</u> Date and Initials
(c) Annual General Meeting Date of annual general meeting held in resp of previous financial year (if an extension o applied for a statement in that regard)					2. <u>Corrections</u> Codes
(d) End of Financial year					Date and initials
Summary of total issued capital as at end of Finan Total Amount of issued share capital Total amount of share premium account Total. Total stated capital in respect of no par value share	*				
Annual duty paid on (1), (2) and (3) above					N\$
Situation of Registered Office and Email Address	Postal address and	Telephone/	Mobile Num		cription of main business actually carried on by pany
Perforated)					(To be completed by company)
ANNUAL RETURN FOR CALENDAR YEAR				D	eturn received ate stamp of Companies egistration Office
Postal address					

Invalid unless stamped by Registrar of Companies

Printing specifications: Size A4; good quality paper; adequate spacing to be allowed for typewritten information to be inserted under appropriate headings; tear off portion to fit Companies Office window envelope; complete Form to be printed on one page; printer's proofs and sample paper to be approved by the Registrar of Companies, Windhoek

Registrar of Companies

PART B

LIST OF DIRECTORS, OFFICERS AND AUDITORS OF THE COMPANY

Directors						
Surname	for	enames		Main Director 🗌 Alterr	nate Direc	tor 🛄
Former surnames and fo	renames					
Contact details						
Resident	ial Address	Business address	Postal Addres	s and Telephone/ Mobile Number	Other	r Directorships
	Date of birth/ID		2	State whether shareholder(if		
Nationality If	number/passport		Date of	yes, kindly complete Part C		
not Namibian)	number	Occupation	appointment	below)	Tick if	new director
Directors Surname Former surnames and fo		enames		Main Director 🗌 Alterr	nate Direc	tor 🗌
	ilenames	~				
Contact details						
Resident	ial Address	Business address		Postal Address and Telepho	one/ Mob	ile Number
	D			State whether shareholder(if		
Nationality If	Date of birth/ID number/passport			yes, kindly complete Part C		
not Namibian)	number	Occupation Date	of appointment	below)	Tick if	new director
Directors						
Surname	for	enames		Main Director 🗌 Altern	nate Direc	tor
Former surnames and fo	orenames					
Contact details				Postal Address and Telephone/		a ::
Residential Address		Business a	Business address		Mobile	Other Directorships
Nationality	Date of birth/ID			State whether shareholder(if yes	kindly	Tick if new
Nationality If not Namibian)	number/passport number	Occupation Date	of appointment	complete Part C below)	, Kinuiy	director
		the second s				

3

Directors Surname	fo	renames		Main Director 🔲 Alternate	Director
Former surnames and fo	prenames				
Contact details					
Resident	tial Address		Business address	Postal Address and Telephone/ Mobile Number	Other Directorships
Nationality If not Namibian)	Date of birth/ID number/passport number	Occupation	Date of appointment	State whether shareholder(if yes, kindly complete Part C below)	Tick if new director

Directors

Surname______forenames_______Main Director Alternate Director

Former surnames and forenames_

Contact details Postal Address and Telephone/ Mobile Other **Residential Address Business address** Number Directorships Date of birth/ID Nationality If number/passport Date of State whether shareholder(if yes, kindly Tick if new not Namibian) number Occupation appointment complete Part C below) director

Directors

Surname______forenames_______Main Director 🗌 Alternate Director

Former surnames and forenames_

Contact details

Residential Address		Bu	siness address	Postal Address and Telephone/ Mobile Number	Other Directorships	
-						
Nationality If not Namibian)	Date of birth/ID number/passport number	Occupation	Date of appointment	State whether shareholder(if yes, kindly complete Part C below)	Tick if new director	

urname	for	renames		Main Director 🔲 Alternate L	Director
ormer surnames and fo	renames				
ontact details					
				Postal Address and Telephone/	Other
Resident	ial Address	_	Business address	Mobile Number	Directorship
	Date of birth/ID				
Nationality If not Namibian)	number/passport number	Occupation	Date of appointment	State whether shareholder(if yes, kindly complete Part C below)	Tick if new director
inter Hamiltonian,	hamber	Cecupation	bute of appointment		
ormer surnames and fo ontact details	renames				
				Postal Address and Telephone/	Other
Resident	Residential Address Business address		Business address	Mobile Number	Directorships
	Date of birth/ID	· · · · · · · · · · · · · · · · · · ·			
Nationality (If not Namibian)	number/passport number	Occupation	Date of appointment	State whether shareholder(if yes, kindly complete Part C below)	Tick if new director
	number	Occupation	Date of appointment	kindly complete Part C below)	
irectors					
urname	for	enames		Main Director 🔲 Alternate L	Director
ormer surnames and fo	renames	1			
ontact details					
Resident	ial Address		Business address	Postal Address and Telephone/ Mobile Number	Other Directorships
	Date of birth/ID				
Nationality(If not Namibian)	number/passport number	Occupation	Date of appointment	State whether shareholder(if yes, kindly complete Part C below)	Tick if new director

OFFICERS/SECRETARY

(If external company give particulars of local managers and secretary here)

_forenames____

______Main Director 🔄 Alternate Director 🗔 _Full forenames_ Surname___

Former surnames and forenames/If corporate body, its name _

Contact details

Residential Address		Business address		Postal Address and Telephone/ Mobile Number	Other Directorships
Nationality(if not Namibian)	+Registration number Date of birth/ID number/passport number	Occupation	Date of appointment	State whether shareholder(if yes, kindly complete Part C below)	Tick if new director
not nambany					
Surname	fore	names		Main Director 🔲 Alternat	e Director

Surname_

Former surnames and forenames_

Contact details

Residen	Residential Address		usiness address	Postal Address and Telephone/ Mobile Number	Other Directorships
Nationality	Date of birth/ID number/passport number	Occupation	Date of appointment	State whether shareholder(if yes, kindly complete Part C below)	Tick if new director
Hadonaity					
Surname	fo	renames		Main Director Alternate	Director

_forenames__ Surname

Former surnames and forenames_

Contact details

Residenti	al Address	В	usiness address	Postal Address and Telephone/ Mobile Number	Other Directorships
Nationality (if	Date of birth/ID number/passport number	Occupation	Date of appointment	State whether shareholder(if yes, kindly complete Part C below)	Tick if new director
not Namibian)	number	Occupation	Date of appointment	kindly complete Part & below)	

*Business address, if corporate body (Additional sheets to be attached if necessary).

+ Registration number, if corporate body

		RS

Name _

Address

Was there any change of a auditor made during the financial year? Yes/No _

If yes, name of previous auditor _____

Reasons for change ____

Date of receipt of advice of change of auditor by Registrar

PART C

SHAREHOLDERS/BENEFICIAL OWNERS

Main shareholder Nominee Shareholder

Main shareholder's details	Nominee's details	
Tick if new shareholder:	Tick if new nominee:	
Full name/entity name:	 Full name:	
(i) Date of birth/ID number/passport number/entity registration number:	 (i) Date of birth/ID number/passport number:	
(ii) Residential address:	 (ii) Residential address:	
(iii) Business address:	 (iii) Business address:	
(iv) Postal address and Telephone/ Mobile Number:	 (iv) Postal address and Telephone/ Mobile Number:	
(v) Nationality/place of incorporation:	 (v) Nationality:	
(vi) Occupation/nature of business:	 (vi) Occupation:	
(vii) Number of shares:	 (vii) Number of shares:	
(viii) Type of shares (ordinary/preference):	 (viii) Type of shares (ordinary/preference):	
(x)Nominal value:	 (x)Nominal value:	
(xi) Date shareholder subscribed:	 (xi) Date shareholder subscribed:	

Main shareholder Nominee Shareholder

Main shareholder's details		Nominee's details	
Tick if new shareholder:		Tick if new nominee:	
Full name/entity name:		Full name:	
(i) Date of birth/ID number/passport number/entity registration number:		(i) Date of birth/ID number/passport number:	
(ii) Residential address:		(ii) Residential address:	
(iii) Business address:		(iii) Business address:	
(iv) Postal address and Telephone/ Mobile Number:		(iv) Postal address and Telephone/ Mobile Number:	
(v) Nationality/place of incorporation:		(v) Nationality:	
(vi) Occupation/nature of business:		(vi) Occupation:	
(vii) Number of shares:		(vii) Number of shares:	
(viii) Type of shares (ordinary/preference):		(viii) Type of shares (ordinary/preference):	
(x)Nominal value:		(x)Nominal value:	
(xi) Date shareholder subscribed:	· · · · · · · · · · · · · · · · · · ·	(xi) Date shareholder subscribed:	

Main shareholder Nominee Shareholder			
Main shareholder's details		Nominee's details	
Tick if new shareholder:		Tick if new nominee:	
Full name/entity name:		Full name:	
(i) Date of birth/ID number/passport number/entity registration number:		(i) Date of birth/ID number/passport number:	
(ii) Residential address:		(ii) Residential address:	
(iii) Business address:		(iii) Business address:	
(iv) Postal address and Telephone/ Mobile Number:		(iv) Postal address and Telephone/ Mobile Number:	
(v) Nationality/place of incorporation:		(v) Nationality:	
(vi) Occupation/nature of business:		(vi) Occupation:	
(vii) Number of shares:		(vii) Number of shares:	
(viii) Type of shares (ordinary/preference):		(viii) Type of shares (ordinary/preference):	
(x)Nominal value:	c	(x)Nominal value:	
(xi) Date shareholder subscribed:		(xi) Date shareholder subscribed:	

Main shareholder Nominee Shareholder

Main shareholder's details Nominee's details Tick if new shareholder: Image: I			
Full name/entity name:	Main shareholder's details	Nominee's details	
(i) Date of birth/ID number/passport	Tick if new shareholder:	Tick if new nominee:	
number/passport number/entity registration number:(i) Date of birth/ID number/passport number:	Full name/entity name:	 Full name:	
number/entity registration number: (i) Date of birth/ID number/passport number:			
(iii) Business address:	number/entity registration		
(iii) Business address:			
(iv) Postal address and Telephone/ Mobile Number:	(ii) Residential address:	 (ii) Residential address:	
(iv) Postal address and Telephone/ Mobile Number:			
Telephone/ Mobile Number:	(iii) Business address:	 (iii) Business address :	
(v) Nationality/place of incorporation:		1.7	
incorporation:	Telephone/ Mobile Number:	 Telephone/ Mobile Number:	
(vi) Occupation/nature of business:			
business:	incorporation:	 (v) Nationality:	
(vii) Number of shares: (vii) Number of shares: (viii) Type of shares (ordinary/preference): (viii) Type of shares (ordinary/preference): (x)Nominal value: (x)Nominal value: (xi) Date shareholder (xi) Date shareholder (xi) Date shareholder		 (vi) Occupation:	
(viii) Type of shares (ordinary/preference):		(,	
(ordinary/preference): (x)Nominal value: (x)Nominal value: (xi) Date shareholder (xi) Date shareholder	(vii) Number of shares:	 (vii) Number of shares:	
(x)Nominal value: (x)Nominal value: (xi) Date shareholder (xi) Date shareholder	(viii) Type of shares	(viii) Type of shares	
(xi) Date shareholder (xi) Date shareholder	(ordinary/preference):	 (ordinary/preference):	
(xi) Date shareholder (xi) Date shareholder			
	(x)Nominal value:	 (x)Nominal value:	
subscribed:	(xi) Date shareholder	(xi) Date shareholder	
	subscribed:	 subscribed:	

Main shareholder Nominee Shareholder

Main shareholder's details		Nominee's details	
Tick if new shareholder:		Tick if new nominee:	
Full name/entity name:		Full name:	
(i) Date of birth/ID number/passport number/entity registration number:		(i) Date of birth/ID number/passport number:	
(ii) Residential address:		(ii) Residential address:	·
(iii) Business address:		(iii) Business address:	
(iv) Postal address and Telephone/ Mobile Number:		(iv) Postal address and Telephone/ Mobile Number:	
(v) Nationality/place of incorporation:		(v) Nationality:	
(vi) Occupation/nature of business:		(vi) Occupation:	
(vii) Number of shares:		(vii) Number of shares:	
(viii) Type of shares (ordinary/preference):		(viii) Type of shares (ordinary/preference):	
(x)Nominal value:	<u></u>	(x)Nominal value:	
(xi) Date shareholder subscribed:		(xi) Date shareholder subscribed:	

Main shareholder Nominee Shareholder			
Main shareholder's details		Nominee's details	
Tick if new shareholder:		Tick if new nominee:	
Full name/entity name:		Full name:	
(i) Date of birth/ID number/passport number/entity registration number:		(i) Date of birth/ID number/passport number:	
(ii) Residential address:		(ii) Residential address:	
(iii) Business address:		(iii) Business address:	
(iv) Postal address and Telephone/ Mobile Number:		(iv) Postal address and Telephone/ Mobile Number:	
(v) Nationality/place of incorporation:		(v) Nationality:	
(vi) Occupation/nature of business:		(vi) Occupation:	
(vii) Number of shares:		(vii) Number of shares:	
(viii) Type of shares (ordinary/preference):		(viii) Type of shares (ordinary/preference):	
(x)Nominal value:		(x)Nominal value:	
(xi) Date shareholder subscribed:		(xi) Date shareholder subscribed:	

Main shareholder Nominee Shareholder

Main shareholder's details	Nominee's details	
Tick if new shareholder:	Tick if new nominee:	
Full name/entity name:	 Full name:	
(i) Date of birth/ID number/passport		
number/entity registration number:	(i) Date of birth/ID number/passport number:	
(ii) Residential address:	 (ii) Residential address:	
(iii) Business address:	 (iii) Business address:	
(iv) Postal address and	(iv) Postal address and	
Telephone/ Mobile Number:	 Telephone/ Mobile Number:	
(v) Nationality/place of incorporation:	 (v) Nationality:	
(vi) Occupation/nature of		
business:	 (vi) Occupation:	
(vii) Number of shares:	 (vii) Number of shares:	
(viii) Type of shares	(viii) Type of shares	
(ordinary/preference):	 (ordinary/preference):	
(x)Nominal value:	 (x)Nominal value:	
(xi) Date shareholder subscribed:	 (xi) Date shareholder subscribed:	

PART E

TO BE COMPLETED BY EXTERNAL COMPANY ONLY

Names and addresses of persons resident in Republic authorised to accept on behalf of the company service of process and any notices required to be served on the company:

Surname	Full forenames			
Contact details	Contact details			
Residential Address	Business address	Date of birth/ID number/passport number	Postal Address and Telephone/ Mobile Number	
1				

CERTIFICATES TO BE GIVEN BY ALL COMPANIES

We hereby certify that the information furnished on this form is correct to the best of our knowledge and belief.

Date	Signature			
		Director		
	Name in block capitals	······		
Date	Signature			
		Secretary (if any)		
Rubber stamp of company, if any, or of secretaries.	Name in block capitals			
Rubber stamp of company, if any, or of secretaries.				
CERTIFICATE TO BE GIVEN BY PRIVATE COMPANY				
I hereby certify that the company has during the period covered by this return complied with the requirements of section 22(1)(b) and (c) of the Act.				
Date	Signature			
		Director		
Rubber stamp of company, if any, or of secretaries.	Name in block capitals			
이에 가지 않는 것은 것은 것은 것을 수 있다. 같은 것은				