



ANNEXURE K

ANNUAL RETURN – COR30.1 FINANCIAL ACCOUNTABILITY SUPPLEMENT – COR30.2

The following documents will be required in order to do the COR 30.2 changes

- INVOICING DOCUMENT
- PARTICULARS OF COMPANY
- ORIGINAL SIGNED POWER OF ATTORNEY
- PROOF OF PAYMENT

The documents must be emailed to

info@fbrs.co.za

Or delivered to our offices:

**30 KREEF CRESCENT
MONTANA PARK
0152**

Or posted to:

**P O BOX 908125
MONTANA
0151**

PAYMENTS TO BE MADE TO

ACCOUNT NAME	:	FIRST FOR BUSINESS REGISTRATION SOLUTIONS (PTY) LTD
BANK	:	FNB
ACCOUNT NUMBER	:	6236 2540 603
BRANCH	:	ZAMBESI DRIVE
BRANCH CODE	:	230145

INVOICING DOCUMENT

INVOICED TO BE MADE OUT TO : _____

TEL NO : _____

FAX NO : _____

CELL NO : _____

EMAIL : _____

POSTAL ADDRESS : _____

VAT NO IF APPLICABLE : _____

**SHOULD YOU REQUIRE THAT THE DOCUMENTS MUST BE POSTED VIA REGISTERED MAIL,
PLEASE ADD AN ADDITIONAL AMOUNT OF R____ TO YOUR PAYMENT.**

PARTICULARS OF COMPANY

NAME OF COMPANY : _____

COMPANY REGISTRATION NUMBER : _____

YEAR OF ANNUAL RETURN : _____

TURNOVER AMOUNT : _____

PLEASE ANSWER THE FOLLOWING QUESTIONS FOR THE FAS

- Name of the person primarily responsible for recording day to day financial transactions and maintaining the company's financial records?

- Identity/registration number of person primarily responsible for recording the day to day financial transactions and maintaining the company's financial records?

- Name of person primarily responsible for compiling financial information and preparing reports and statements?

- Identity/registration number of person primarily responsible for compiling financial information and preparing reports and statements?

- The person, if any, who provides advice to the company concerning the maintenance of financial records is?

- **The name of person performing the Independent Review of Annual Financial Statements, if applicable?**

- **The recognised profession of the person performing Independent Review of Annual Financial Statements, if applicable?**

- **The practise number of the person performing the Independent Review of Annual Financial Statements, if applicable?**

- **Indicate how the Company maintains it Financial records:**

Manually, in paper based records; or

Electronically-computer based system

- **Indicate how the Company prepares bank reconciliations, balance sheets and Income and Expense statements:**

Monthly

Quarterly

Semi-annually

Annually

Never

- **If the Company deals in goods, when does it carry out stocktaking?**

- **Does the Company hold any assets in fiduciary capacity for persons not related to the Company, as contemplated in Regulation 28(2)(b)?**

YES

NO

**POWER OF ATTORNEY FOR SUBMITTING ANNUAL RETURN AND FINANCIAL
ACCOUNTABILITY SUPPLEMENT FOR A COMPANY
FROM DIRECTOR ACTING ON BEHALF OF COMPANY**

I, the undersigned

ID NO : _____

being desirous of submitting the Annual Return and FAS for

(Company Name)

(Registration Number)

do hereby nominate, constitute and appoint:

**YOLANDE HENNING with full power of substitution, to be my lawful agent in my name,
place and stead;**

**To deliver to the Registrar of Companies, the Annual Return and COR30.2 and/or any
other documents or form that may be required to submit the Annual Return and the
Financial Accountability Supplement.**

Signed at _____ on this ____th day of _____ 20__.

(Signature Director/Shareholder)