



# ABM

ACCOUNTING & BUSINESS MANAGEMENT LIMITED

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I, ....., director of ..... (.....)  
give authority to Accounting & Business Management Limited to act on  
behalf of me for all respect of my company.

This includes obtaining approval letter from Companies office, filing  
annual return and obtaining all relevant information from companies'  
office in regards to my company.

Full Name: \_\_\_\_\_

Phone: \_\_\_\_\_

DOB: \_\_\_\_\_

Place of Birth (Town & Country): \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_

Signature: \_\_\_\_\_

Dated: \_\_\_\_\_