

INCORPORATION QUESTIONNAIRE

Name of Client: _____
Name of Firm/Company: _____
Address 1: _____
Address 2: _____
City, State and Zip Code: _____

1. State of Incorporation: _____

2. Name of corporation (Submit three names in order of preference)

3. States in which corporation will qualify:

4. Specific business purpose:

5. Incorporator's Names

Addresses (street address required by most states)

6. Directors: Number _____

Directors' Names

Addresses (street address required by most states)

_____	_____
_____	_____
_____	_____

7. Authorized capital stock:

Common Stock

_____ shares of a par value of \$ _____ per share
_____ shares of no par value

Preferred Stock

_____ shares of a par value of \$ _____ per share
_____ shares of no par value

Attach the relative rights and preferences for each class of Preferred Stock.

8. NRAI our affiliate will be the registered agent and office, if not, the agents name and address are:

9. In New York, NRAI our affiliate will provide the post office address to receive process served on the Secretary of State, if not, the address is: _____

10. The office of the corporation will be in the county of _____ (New York Corporations ONLY).

11. Shall preemptive rights for stockholders to subscribe to additional shares be granted or denied? _____

12. Shall provisions be made for cumulative voting if not already required by law? _____

13. Any special provisions: _____

14. Fiscal Year End: Determined by the Board of Directors _____ or shall be _____

15. Annual meeting of stockholders shall be held on (Day/Month) _____ at the hour of _____.

16. Will a corporate kit be needed? _____

17. Where shall the following communications be sent for the corporation:

COMPANY NAME AND ADDRESS	COUNSEL NAME AND ADDRESS

SERVICE OF PROCESS ADDRESS	TAX & ROUTINE CORRESPONDENCE	RENEWAL INVOICING ADDRESS
<p>To:</p> <p>___ Company Address Attention: Telephone #: Fax #:</p> <p>___ Counsel Address Attention: Telephone #: Fax#:</p> <p>(Attach any Special Instructions)</p>	<p>To:</p> <p>___ Company Address Attention: Telephone #: Fax #:</p> <p>___ Counsel Address Attention: Telephone #: Fax#:</p>	<p>To:</p> <p>___ Company Address Attention: Telephone #: Fax #:</p> <p>___ Counsel Address Attention: Telephone #: Fax#:</p>