Form 35

(Regulation 36)

(In typescript and completed in duplicate)



**THE PATENTS AND COMPANIES REGISTRATION AGENCY**

**The Companies Act, 2017**

**(Act No. 10 of 2017)**

**\_\_\_\_\_\_\_\_\_\_\_\_**

**The Companies (Prescribed Forms) Regulations, 2018**

***(Section 274, 301)***

***Available at*** [***www.pacra.org.zm***](http://www.pacra.org.zm)

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **NOTICE OF CHANGE OF FINANCIAL YEAR** | | | | | | | | |
| **PART A**  **COMPANY DETAILS** | | | | | | | | |
|  | Type of Company | | | Local Company |  | Foreign Company |  |  |
|  | Company Number  *Indicate the 12 digit registration number* | | |  | | | |  |
|  | Company Name  *Indicate the name as captured on the certificate of incorporation* | | |  | | | |  |
|  | Phone Number  *Include the international code (e.g. +260 for Zambia)* | *Mobile* | |  | | | |  |
| *Landline* | |  | | | |
|  | Email Address | | |  | | | |  |
|  | Physical Address  *State the registered office of the Company* | | *Plot/House/ Village* |  | | | |  |
| *Street* |  | | | |
| *Area* |  | | | |
| *Town* |  | | | |
| *Province* |  | | | |
| **PART B**  **PARTICULARS OF THE CHANGE OF FINANCIAL YEAR** | | | | | | | | |
|  | Current Financial Year End  *Indicate the date of the current financial year end* | | |  | | | |  |
|  | New Financial Year End *Indicate the date of the proposed new financial year end* | | |  | | | |  |
| **PART C**  **DECLARATION** | | | | | | | | |
|  | First Name:  Surname:  Capacity: Director Secretary  Signature: Date: | | | | | | | |
| **PART D**  **PARTICULARS OF PERSON LODGING NOTICE** | | | | | | | | |
|  | First Name | | |  | | | |  |
|  | Surname | | |  | | | |
|  | Gender | | |  | | | |
|  | Date of Birth | | |  | | | |
|  | Nationality | | |  | | | |  |
|  | Identity Type  For Zambians: *NRC*  For non-Zambians: *NRC/Passport/ Driver’s Licence/Resident Permit* | | |  | | | |  |
|  | Identity Number | | |  | | | |
|  | Phone Numbers *Include the international code (e.g. +260 for Zambia)* | *Mobile* | |  | | | |
| *Landline* | |  | | | |
|  | Email Address | | |  | | | |  |
|  | Physical Address  *State the principal office of the Company* | *Plot/House/ Village* | |  | | | |  |
| *Street* | |  | | | |
| *Area* | |  | | | |
| *Town* | |  | | | |
| *Province* | |  | | | |
| *Country* | |  | | | |
|  | Signature: Date: | | | | | | | |