

**REGISTERED ADDRESS**

INTRAGEN CAPITAL LTD, OFFICE 1002,  
182-184 HIGH STREET NORTH,  
EAST HAM, LONDON - E6 2JA. UK

**CONTACT DETAILS**

EMAIL: info@intragencapital.com  
WHATSAPP: +44 7418328956  
WEBSITE: www.intragencapital.com

## BUSINESS PLAN FORMAT

Company Name:

<b>Business Activity (if Trading Company)</b>	
Please fully describe the intended activities, including products and services being sold/provided.	
<b>Business Activity (if Holding Company)</b>	
Please provide name and line of business of the investee company.	
Please describe what assets it will acquire and hold.	
<b>Company Details</b>	
If you have an existing company, please advise year the business began actual operations and number of employees.	
Website (if any)	
Market & Sector targeted	

O U R   E X P E R T I S E   I N

BANK SECURITIES

TRADE PROGRAM

INVESTMENTS

CONSULTANCY

DUE DILIGENCE

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Goals & Objective	
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<b>Source of Initial Funds/Deposit</b>	
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Please indicate how did you earn or obtain this money and explain how personal funds have been accumulated.	
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Will first initial funds be coming from personal account or individual or company or client payment	
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Please specify clearly	
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<b>Incoming Payments</b>	
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Please provide expected ORIGIN of funds to be credited and the list of countries and banks from which your revenue will originate.	
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Name of main Clients and their Locations	<b>Name</b>	<b>Country</b>

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<b>Outgoing Payments</b>		
Please provide expected destination of payments and the list of countries and banks to which you will remit payments.	Name	Country
Name of main Suppliers and their Locations	Name	Country

<b>Forecasts of Business</b>		
Expected Annual Turnover	USD	
Expected Annual Expenditure	USD	
Size Transactions/per month	<b>In coming</b>	<b>Outgoing</b>
	USD	USD
Expected number of transactions	<b>In coming</b>	<b>Outgoing</b>
Monthly		
Yearly		
Please advise when the account will be fully transactional.		

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<b>Brief Background on Ultimate Beneficial Owner (s) - UBO</b>	
Please indicate past and current employment and related experience.	
Please indicate qualification of UBO	

Hereby, I / We declare and confirm that the above-mentioned company of which I/We am/are the Ultimate Beneficial Owners, will not be utilized in any of the following activities:

1. Money Laundering.
2. Receiving the proceeds of drug trafficking.
3. Receiving the proceeds of criminal activities. Terrorist activities.
4. Promotion of Adult content websites and related industry.
5. Trading of weapons and military arms.
6. Entering any other illegal activities.

SIGNATURE/S

Name of UBO(s)\_\_\_\_\_

Date:

SIGNATURE/S

Name of UBO(s):\_\_\_\_\_

Date:

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