

**Form B**

**ANTIGUA AND BARBUDA  
The Business Names Act, 1989  
Statement of Additional Particulars**

No .....

**(Section 8)**

Name(s) of Applicant: .....

Name of Business:

.....  
.....

Date of registration .....

State in details the nature of change required:.....

.....  
.....  
.....  
.....

Where change include an additional individual, state name, address and nationality:.....

.....  
State Name

.....  
Address

.....  
Nationality

Effective date of change:.....

Any other details necessary:.....

.....

.....

Receipt No: .....

.....

Registrar