Schedule 2

ISSUER REGISTRATION STATEMENT Sections 97(2), 97(3) and 97(4) of the Securities Act, 2001

FORM RS - 2

Select One: [] Annual Registration []	Issue of Securities
(Exact name of Company as set forth in Certific	ate of Incorporation)
Place and date of incorporation:	
Street and postal address of registered office:	
Company telephone number: ()	
Fax number: ()	<u> </u>
Email address:	
Financial year-end: (month) (day)	(year)
Contact person(s):	
Telephone number (if different from above): ()	
Fax number: ()	
Email address:	
Did the company file all reports required to be filed by Section during the preceding 12 months?	98 of the Securities Act, 2001
[] Yes [] No	

	he company file all reports require onths?	ed to be filed by the Comp	oanies Act du	ring the precedin	g
[]Y	Yes [] No				
1.	Description of the Industry in which the Company Operates				
2	E-shares an abish the Come		-4. J		
2.	Exchanges on which the Comp	Securities Type	No. of Shares	Valuation	
3.	Description of Securities Bein Offeror of the Securities)	g Offered (including w	ho is the Iss	uer and who is t	the

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escription of Share Capital	
a) Authorised	
TVDE/CLASS	No OF CHADEO
TYPE/CLASS	No. OF SHARES
b) Issued	
TVDE/CU A CC	N. OF CHARE
TYPE/CLASS	No. OF SHARES
c) Outstanding	
TYPE/CLASS	No. OF SHARES

		Position:
Name:		Age:
rume.		_ 11g0.
Mailing Address:		
Telephone No.:		
List jobs held during past five Give brief description of curre		of employers and dates of employment).
Education (degrees or other ac	ademic qualifications, so	schools attended, and dates):
Also a Director of the compan	y [] Yes [] No
If retained on a part time basis matters:	, indicate amount of tim	ne to be spent dealing with company

Use additional sheets if necessary (See Appendix 1).

Information concerning non-Executive Dir	rectors:
Name:	Position:
	Age:
Mailing Address:	
Telephone No.:	
List jobs held during the past five years (in	cluding names of employers and dates of
employment). Give brief description of cur	
Education (degrees or other academic qual	ifications, schools attended, and dates):

Use additional sheets if necessary (See Appendix 2)

8. SUBSTANTIAL SHAREHOLDERS

(a) Principal owners of the company (those who beneficially own more than 5% of the common and preferred shares presently outstanding whether directly or indirectly) starting with the largest common shareholder. Indicate by endnote any transaction where the consideration was not cash. State the nature of any such consideration.

SECURITIES NOW HELD:

Name: Address:	Class of Shares:	No. of Shares:	% of Total

(b) Include all common shares issuable upon conversion of convertible securities and show conversion rate per share as if conversion has occurred.

UPON CONVERSION:

Name: Address:	Class of Shares:	Conversion Rate:	No. of Shares upon Conversion	% of Total*

^{*} Current holding of shares if conversion option were exercised.

Name:	Address:	Country of Incorporation:	Countries of Registration (where applicable)	Name of the Exchange(s) on which the company's securities are listed:

10. Name(s) and Address(es) of Subsidiary(ies)

	ces(cs) of Substitian		Name of the
Name:	Address:	Percentage	Exchange(s) on which
Traine.	Addiess.	Ownership:	the company's
			securities are listed:

11. Name(s) and Address(es) of Affiliate(s)

Name:	Address:	Name of the Exchange(s) on which the company's securities are listed:

SIGNATURES

A Director, the Chief Executive and Corporate Secretary shall sign this Registration Statement on behalf of the company. By so doing each certifies that he has made diligent efforts to verify the material accuracy and completeness of the information herein contained.

Name of Chief Executive Officer:	Name of Director:
Signature	Signature
Date	Date
Name of Corporate Secretary:	
Signature	
Date	

	Position:
Name:	Age:
Mailing Address:	
Telephone No.:	
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Education (degrees or other academic qualifi	ications, schools attended, and dates):
Also a Director of the company [] Ye	es []No
If retained on a part time basis, indicate amomatters:	ount of time to be spent dealing with company

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Mailing Address:	
Telephone No.:	
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APPENDIX 2 DIRECTORS OF THE COMPANY

Name:		Position:
-		Age:
Mailing Address:		
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Telephone No.:		
List jobs held during the past employment). Give brief desc		
Education (degrees or other a	cademic qualifications, sch	ools attended, and dates):

Name:		Position:
		Age:
Mailing Address:		
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Mailing Address:		
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