

NOTIFICATION OF BENEFICIAL OWNERSHIP INFORMATION

Division 8A, 60B (3), Companies Act 2016

Submission Number

BOUXXXXXXXXXXXX

Date & Time Received

DD/MM/YYYY 08:32 AM

PARTICULARS OF COMPANY

COMPANY NAME	COMPANY X SDN. BHD.
COMPANY NO	2XXXXXXXX (XXXXX-U)
STATUS	EXISTING

PARTICULARS OF BENEFICIAL OWNERSHIP

TYPE OF BO APPLICATION	BENEFICIAL OWNER		
STATUS	NEW		
DATE OF BECOMING BO	DD/MM/YYYY		
DATE OF DATA RECORDED	DD/MM/YYYY		
TYPE	INDIVIDUAL		
CATEGORY	INDIVIDUAL		
NAME	XXX		
IDENTIFICATION NO.	XXXXXXXXXXXX	DATE OF BIRTH	DD/MM/YYYY
GENDER	MALE	RACE	CHINESE
NATIONALITY	MALAYSIA	CITIZENSHIP	MALAYSIAN
DESIGNATION/POSITION IN THE COMPANY	COMPANY DIRECTOR		
RESIDENTIAL ADDRESS	XXXX PULAU PINANG MALAYSIA		
BUSINESS ADDRESS	XXXX PULAU PINANG MALAYSIA		
EMAIL	XXXXX@gmail.com	CONTACT NO.	011XXXXXXXX
TYPE OF BO	DIRECT OWNERSHIP Criteria A - Holds directly in not less than 20% of the shares in the company		
PERCENTAGE %	Criteria A - Direct Ownership: 50.0000		

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GENDER	MALE	RACE	CHINESE
NATIONALITY	MALAYSIA	CITIZENSHIP	MALAYSIAN
DESIGNATION/POSITION IN THE COMPANY	COMPANY DIRECTOR		
RESIDENTIAL ADDRESS	XXXX PULAU PINANG MALAYSIA		
BUSINESS ADDRESS	XXXX PULAU PINANG MALAYSIA		
EMAIL	XXXXXX@gmail.com	CONTACT NO.	019XXXXXX
TYPE OF BO	DIRECT OWNERSHIP Criteria A - Holds directly in not less than 20% of the shares in the company		
PERCENTAGE %	Criteria A - Direct Ownership: 50.0000		

DECLARATION

I CONFIRM THAT THE FACTS AND INFORMATION STATED IN THIS DOCUMENT ARE TRUE AND TO THE BEST OF MY KNOWLEDGE.

NAME	XXXX
DATE OF APPLICATION	DD/MM/YYYY

ATTENTION : It is an offence under section 591 of the Companies Act 2016 to make or authorize the making of a statement that a person knows is false or misleading and that person may be liable, upon conviction, to imprisonment for a term not exceeding ten years or to a fine not exceeding RM3 million or to both.

LODGER INFORMATION

NAME	XXXX
IDENTIFICATION NO.	XXXXXXXXXXXXXX
ADDRESS	XXXX PULAU PINANG MALAYSIA
EMAIL ADDRESS	XXXXXX@gmail.com
PHONE NO.	012XXXXXX
PRACTISING CERTIFICATE NO.	XXXXXXXXXX
PROFESSIONAL BODY TYPE	MACS
LICENSE NO. /MEMBERSHIP NO.	XXXX