

|   |                   |                   |                  |
|---|-------------------|-------------------|------------------|
| Universal Register Application Form for:<br>(Undertaking unit: Please mark V) |                   |                   |                  |
| Commerce Register   | Business Register | Specific Business | Allowed Business |
|   |                   |                   |                  |

Register Application Form  
for Change / Set-up of  
Uniform Certificate for  
Profit-seeking Enterprise

|   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Profit-seeking Enterprise<br>uniform number |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Tax File Number for<br>Entertainment Tax    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

| Application Item | Set - up | Change of Person-in-charge | Name Change | Location Change | Business Item Change | Organization Change | Change of Capital Increase | Change of Capital Decrease | Change of Partners | Others |
|------------------|----------|----------------------------|-------------|-----------------|----------------------|---------------------|----------------------------|----------------------------|--------------------|--------|
|                  | 01       | 02                         | 03          | 04              | 05                   | 06                  | 07                         | 08                         | 09                 | 00     |

|   |  |                 |                      |                        |             |             |                 |                          |                    |        |                     |  |  |  |  |  |
|---|--|-----------------|----------------------|------------------------|-------------|-------------|-----------------|--------------------------|--------------------|--------|---------------------|--|--|--|--|--|
| Name of Profit-seeking Enterprise   |  |                 |                      |                        |             |             |                 |                          |                    |        |                     |  |  |  |  |  |
| Address of Profit-seeking Enterprise  | No. ____, __ Floor, Room ____, Alley ____, Lane ____,<br>Section ____ of ____ Road / Street, ____ Li / Village,<br>____ Country / Town / City / District, ____ County / City |                 |                      |                        |             |             |                 |                          |                    |        |                     |  |  |  |  |  |
| Capital Amount  | NTD  |                 |                      |                        |             |             |                 |                          |                    |        |                     |  |  |  |  |  |
| Organization Type   | Company Limited by shares  | Limited Company | Unlimited Company    | Dual Liability Company | Partnership | Sole Trader | Foreign Company | Foreign Company's Office | Subsidiary Company | Others |                     |  |  |  |  |  |
|   | 01   | 02              | 03                   | 04                     | 05          | 06          | 07              | 08                       | 09                 | 00     |                     |  |  |  |  |  |
| Business Item   |  |                 |                      |                        |             |             |                 |                          |                    |        |                     |  |  |  |  |  |
| Registration Items for Related Persons  | Name   | Date of Birth   | Identity Card Number |                        |             |             |                 |                          |                    |        | Capital Contributed | Household Registration Address   |  |  |  |  |
| Person-in-charge  |  |                 |                      |                        |             |             |                 |                          |                    |        |                     | No. ____, __ Floor, Room ____, Alley ____, Lane ____,Section __<br>of ____ Road / Street, ____ Li / Village,____<br>Country / Town / City / District, ____ County / City |  |  |  |  |
| Partner (Companies need not fill in)  |  |                 |                      |                        |             |             |                 |                          |                    |        |                     | No. ____, __ Floor, Room ____, Alley ____, Lane ____,Section __<br>of ____ Road / Street, ____ Li / Village,____<br>Country / Town / City / District, ____ County / City |  |  |  |  |
| Able person with limited activities who is allowed to run solely or with partners |  |                 |                      |                        |             |             |                 |                          |                    |        |                     | No. ____, __ Floor, Room ____, Alley ____, Lane ____,Section __<br>of ____ Road / Street, ____ Li / Village,____<br>Country / Town / City / District, ____ County / City |  |  |  |  |
| Allowed Legal Proxy   |  |                 |                      |                        |             |             |                 |                          |                    |        |                     | No. ____, __ Floor, Room ____, Alley ____, Lane ____,Section __<br>of ____ Road / Street, ____ Li / Village,____<br>Country / Town / City / District, ____ County / City |  |  |  |  |
| Disable person or person with limited capability whose business run by proxy      |  |                 |                      |                        |             |             |                 |                          |                    |        |                     | No. ____, __ Floor, Room ____, Alley ____, Lane ____,Section __<br>of ____ Road / Street, ____ Li / Village,____<br>Country / Town / City / District, ____ County / City |  |  |  |  |
| Legal agent to run business as proxy  |  |                 |                      |                        |             |             |                 |                          |                    |        |                     | No. ____, __ Floor, Room ____, Alley ____, Lane ____,Section __<br>of ____ Road / Street, ____ Li / Village,____<br>Country / Town / City / District, ____ County / City |  |  |  |  |
| Managing Agent  |  |                 |                      |                        |             |             |                 |                          |                    |        |                     | No. ____, __ Floor, Room ____, Alley ____, Lane ____,Section __<br>of ____ Road / Street, ____ Li / Village,____<br>Country / Town / City / District, ____ County / City |  |  |  |  |
| Person in charge of accounting  |  |                 |                      |                        |             |             |                 |                          |                    |        |                     | No. ____, __ Floor, Room ____, Alley ____, Lane ____,Section __<br>of ____ Road / Street, ____ Li / Village,____<br>Country / Town / City / District, ____ County / City |  |  |  |  |

|                                |                              |  |  |  |  |  |  |  |  |  |              |       |  |  |  |  |  |  |  |  |  |  |
|--------------------------------|------------------------------|--|--|--|--|--|--|--|--|--|--------------|-------|--|--|--|--|--|--|--|--|--|--|
|                                | Before set-up or change      |  |  |  |  |  |  |  |  |  | After change |       |  |  |  |  |  |  |  |  |  |  |
| Profit-seeking Enterprise Seal |                              |  |  |  |  |  |  |  |  |  |              |       |  |  |  |  |  |  |  |  |  |  |
| Person-in-charge Stamp         | ID No.                       |  |  |  |  |  |  |  |  |  | ID No.       |       |  |  |  |  |  |  |  |  |  |  |
|                                | Proxy                        |  |  |  |  |  |  |  |  |  |              |       |  |  |  |  |  |  |  |  |  |  |
|                                | Name                         |  |  |  |  |  |  |  |  |  |              | Stamp |  |  |  |  |  |  |  |  |  |  |
|                                | Address                      |  |  |  |  |  |  |  |  |  |              |       |  |  |  |  |  |  |  |  |  |  |
| Application date               | ____/____/____<br>(mm/dd/yy) |  |  |  |  |  |  |  |  |  | Telephone    |       |  |  |  |  |  |  |  |  |  |  |

|   |   |                            |   |               |
|---|---|----------------------------|---|---------------|
| Opening business date                                       | ____/____/____ (mm/dd/yy)   |                            |   |               |
| Original certificate number                                 |   |                            |   |               |
| Profit-seeking Enterprise location before change            | ____ Country/Town/City/District,<br>____ County / City              |                            | No. __, __ Floor, Room __, Alley __, Lane __,<br>Section __ of _____ Road / Street, _____ Li / Village, |               |
| Paramount organization name                                 |   |                            |   |               |
| Paramount organization location                             |   |                            |   |               |
| Profit-seeking Enterprise number for paramount organization |   |                            |   |               |
| House tax number for Profit-seeking Enterprise location     | County / City   | Country/Town/City/District | Li / Village of   | Series number |
| Management code   |   |                            |   |               |
| Approval paper number                                       | No. _____ of _____ Document series,<br>On ____/____/____ (mm/dd/yy) |                            |   |               |
| Certificate number for this case                            |   |                            |   |               |