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### INCORPORATION INFORMATION SHEET

*(Please complete ALL items or indicate N/A if applicable)*

1. Your Name \_\_\_\_\_
2. Address for billing purposes: \_\_\_\_\_
3. Do you wish to designate the incorporator: Yes \_\_\_\_\_ (Name \_\_\_\_\_)  
No \_\_\_\_\_ *(If no, our office will be the incorporator).*
4. Date desired to have corporation formed by: \_\_\_\_\_
5. Corporate Name: \_\_\_\_\_  
Two alternative names *(second to be used if the first choice is unavailable):*
  - 1) \_\_\_\_\_
  - 2) \_\_\_\_\_
6. Will the corporation's name be the same as the business' name?  
Yes \_\_\_\_\_ No \_\_\_\_\_  
If not, what will the business's name (doing business as - d/b/a) be?  
\_\_\_\_\_
7. Purpose for the corporation *(what type of business will the corporation be involved in?)*  
\_\_\_\_\_
8. Do you need this corporation to be formed by a certain date? \_\_\_\_\_  
*(State does not guarantee turnaround time unless expedited filing is used.)*  
\_\_\_\_\_
9. Business' address: \_\_\_\_\_
10. Registered office address: \_\_\_\_\_

11. Registered agent name: \_\_\_\_\_  
(Note: We can act as your registered agent.)

Address: \_\_\_\_\_ County: \_\_\_\_\_

12. Mailing address for state tax purposes: \_\_\_\_\_

13. Names of initial directors: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Should they be named in the Articles? Yes \_\_\_\_\_ No \_\_\_\_\_

(Note: This is not required.)

14. Names and titles of the initial officers:

Name	Title	Residence Address	SS#	Date of Birth
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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

15. Names of the shareholders:

Name	% of Shares	Residence Address	SS#	Date of Birth
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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

16. Are all of the shareholders either U.S. Citizens or Green Card holders?

Yes \_\_\_\_\_ No \_\_\_\_\_

17. Miscellaneous Information you wish to provide: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

*This form requests basic information. We can discuss other possible options with you at time of consultation. Please return form via email, fax or mail.*