

ANNUAL PARTNERSHIP STATEMENT

Annual Report for the Year Ending _____

FILING FEE: \$75.00

Make Check Payable to: CNMI Treasury

File Original and Two Copies

FILING: An annual statement shall be filed on or before
March 31 of each year, as of December 31 of the preceding year.

Name, Mailing Address & Telephone Number of the Partnership:

State the name, resident, citizenship and nature of all partners:

Name	Citizenship	Nature	Mailing Address
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Describe business activities:

Location of principal place of business in the Commonwealth:

Districts in which business is presently conducted:

If the Partnership was formed under the laws of any jurisdiction other than the Commonwealth, state the named of the jurisdiction and the location of the principal place of business:

Date Partnership was formed:

Date Partnership commenced business in the Commonwealth:

Please attached a Balance Sheet:

We certify the fact that none of the partners is a minor or an incompetent person.

We also certify that all of the answers made in this statement are true, complete and correct to the best of our knowledge.

(This statement must be signed by all Partners)

Print Name of Partner Signing

Date

Print Name of Partner Signing

Date

Print Name of Partner Signing

Date

ACKNOWLEDGEMENT

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BEFORE ME, the undersigned authority personally appeared:

_____, _____, _____, _____

_____, known to me to be the parties whose names are subscribed above, and being by

me duly sworn, acknowledge to me that they signed the above and foregoing document for the purposes

therein set forth.

SUBSCRIBED AND SWORN to before me this _____ day of _____, 20__.

NOTARY PUBLIC