

Form A
REGISTRATION OF BUSINESS RULES 1957
[RULE 3] - PORTAL
BUSINESS REGISTRATION

Reference No:

EB-A2021091301633

(* Mandatory Field)

NAME APPROVAL NO.

EB-A2021091301633

I/We the person(s) responsible submit for registration of the following particulars regarding the under-mentioned business.

INFORMATION OF BUSINESS (* Mandatory field)

1. * BUSINESS NAME

NADA CAHAYA TRADING

2. A) * DATE OF COMMENCEMENT OF BUSINESS
(dd/mm/yyyy)

13/09/2021

B) * REGISTRATION
PERIOD

5

YEARS

3. * PARTNERSHIP AGREEMENT
(If yes, upload the copy of agreement)

N

DATE

(dd/mm/yyyy)

4. ADDRESS OF PRINCIPAL PLACE OF BUSINESS

LOT 314, KG. SERKAM DARAT, MUKIM SERKAM, JASIN

TOWN

MERLIMAU

POSTCODE

77300

STATE

M

5. * TELEPHONE

0196064557

FAX

6. E-MAIL

dhc.serkam@gmail.com

7. CORRESPONDENCE ADDRESS
(if different from above)

NO 22, JALAN CERDIK 3, TAMAN UNIVERSITI

TOWN

KAJANG

POSTCODE

43000

STATE

B

Form A
REGISTRATION OF BUSINESS RULES 1957
[RULE 3] - PORTAL
BUSINESS REGISTRATION

Reference No:

EB-A2021091301633

INFORMATION OF BRANCHES (* Mandatory field)

* NO OF BRANCHES 0

NO	BRANCH ADDRESS	TOWN	POSTCODE	STATE
----	----------------	------	----------	-------

INFORMATION TYPE OF BUSINESS (* Please fill in at least 1)

BUSINESS DESCRIPTION

ACCOMMODATION SERVICES, TRAINING AND SERVICES, FOOD AND BEVERAGE, EVENT MANAGEMENT

NO	BUSINESS TYPE (CODE)	DESCRIPTION
----	----------------------	-------------

SUBMISSION DATE
(dd/mm/yyyy)

13/09/2021

Form A
REGISTRATION OF BUSINESS RULES 1957
[RULE 3] - PORTAL
BUSINESS REGISTRATION

Reference No:

EB-A2021091301633

INFORMATION OF OWNERS (* Mandatory field)

Form A
REGISTRATION OF BUSINESS RULES 1957
[RULE 3] - PORTAL
BUSINESS REGISTRATION

Reference No:

EB-A2021091301633

VERIFICATION BY OWNER/PARTNER(S) (* Mandatory field)

I/We confirm the accuracy of all the statements made in the form and declare that I/We am/are the owner/partner(s) of the business the name of which is

NADA CAHAYA TRADING

* NAME	MD. NASIR BIN YUSOF	
* PERSONAL IDENTIFICATION NO.	640601045585	* COLOUR BLUE
* ADDRESS	NO 22, JALAN CERDIK 3, TAMAN UNIVERSITI,	
TOWN	KAJANG	
POSTCODE	43000	
STATE	10	
* E-MAIL	mdnasiryu64@gmail.com	
* TELEPHONE	0196064557	
FAX		

Form A
REGISTRATION OF BUSINESS RULES 1957
[RULE 3] - PORTAL
BUSINESS REGISTRATION

Reference No:

EB-A2021091301633

VERIFICATION BY OWNER/PARTNER(S)

NO.	NAME	IDENTITY CARD NO	COLOUR	SIGNATURE
-----	------	------------------	--------	-----------