

**SAMPLE for licensed corporations**



**SECURITIES AND FUTURES COMMISSION**

**Form 5**

**Notification – Licensed Corporation,  
Registered Institution, Licensed Representative and  
Substantial Shareholder**

**Important:** You should only complete and submit sections 1 and 18, and other sections relevant to your notification to the Commission.

**Name of person making notification**

*Happy Securities Limited*

**CE number**

<i>X</i>	<i>Y</i>	<i>Z</i>	<i>1</i>	<i>2</i>	<i>3</i>
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**Name of contact person regarding any queries on this form**

*May LEE*

Name of designated person and telephone number

**Telephone number of the contact person**

*2345-xxxx*

**Warning:**

You must fill in this form accurately and truthfully. Section 384(1) of the Securities and Futures Ordinance states:

“A person commits an offence if –

- (a) *he, in purported compliance with a requirement to provide information imposed by or under any of the relevant provisions, provides to a specified recipient any information which is false or misleading in a material particular; and*
- (b) *he knows that, or is reckless as to whether, the information is false or misleading in a material particular.”*

The punishment for this offence is a fine of up to \$1 million and imprisonment for up to 2 years.

**SAMPLE**

You may "✓" more than one section.

## Section 1: Types of notification

1.1 Please tick "✓" the types of notification you would like to make to the Commission.

Types of notification		Section number
<input type="checkbox"/>	Cessation of business – licensed corporation or registered institution.	2
<input type="checkbox"/>	Ceasing to act as a licensed representative. <i>(Not applicable to registered institutions.)</i>	
<input type="checkbox"/>	Notification by licensed representative.	3A
<input type="checkbox"/>	Notification by licensed corporation.	3B
<input type="checkbox"/>	Ceasing to act as a responsible officer of a licensed corporation. <i>(Not applicable to registered institutions.)</i>	
<input type="checkbox"/>	Notification by responsible officer.	4A
<input type="checkbox"/>	Notification by licensed corporation.	4B
<input type="checkbox"/>	Change in executive officer of a registered institution or his/her particulars. <i>(Applicable to registered institutions only.)</i>	5
<input type="checkbox"/>	Change in director or his/her particulars.	6
<input type="checkbox"/>	Change in complaints officer or his/her particulars.	7
<input type="checkbox"/>	Change in emergency contact person or his/her particulars.	8
<input type="checkbox"/>	Change in share capital.	9
<input type="checkbox"/>	Change in shareholding structure.	10
<input type="checkbox"/>	Change in contact information.	11
<input type="checkbox"/>	Change in bank account. <i>(Applicable to licensed corporations only.)</i>	12
<input type="checkbox"/>	Change in auditor.	13
<input type="checkbox"/>	Change in name.	14
<input checked="" type="checkbox"/>	Change in associated entity or its particulars.	15
<input type="checkbox"/>	Change in insurance policy. <i>(Applicable to licensed corporations only.)</i>	16
<input type="checkbox"/>	Other notifications.	17

**Section 15: Change in associated entity or its particulars**

**Part A (Corporation ceasing to act as an associated entity)**

15.1 Please provide the following information on the corporation ceasing to act as your associated entity.

Name of corporation	CE No. (if any)	Date of cessation (dd/mm/yyyy)
<i>Happy Nominee Limited</i>	<i>XYZ007</i>	<i>15 / 10 / 2003</i>
		/ /
		/ /

15.2 Please state the reason for cessation.

*Group restructuring*

15.3 Has the above associated entity fully accounted for and properly disposed of all your clients' assets? (Not applicable where the associated entity is a licensed corporation or an authorized financial institution.)

Yes.

No. Please provide the particulars of all the client assets that the associated entity has not fully accounted for and properly disposed of, and your plan to safeguard such assets.

[Note: Your associated entity is required to complete relevant sections of Form 6 – Notification - Associated Entity.]

**Part B (Appointing a new associated entity)**

15.4 Please state the name of the corporation proposing to act as your associated entity.

Name of corporation	Is it a licensed corporation or registered institution?		Effective date (dd/mm/yyyy)
<i>Happy Associate Limited</i>	<input type="checkbox"/> Yes, CE No. _____	<input checked="" type="checkbox"/> No*	<i>16 / 10 / 2003</i>
	<input type="checkbox"/> Yes, CE No. _____	<input type="checkbox"/> No*	/ /
	<input type="checkbox"/> Yes, CE No. _____	<input type="checkbox"/> No*	/ /

\* If you tick NO to any of the above:

- Please complete *Supplement 5 – Basic Information on Associated Entity* for each associated entity.

[Note: Your associated entity is required to complete relevant sections of Form 6 – Notification - Associated Entity.]

**SAMPLE**

**Part C (Change in particulars of associated entity)**

15.5 Please provide the following information:

Name of associated entity	<i>Happy Associate Limited</i>	CE No. (if any)	<i>N/A</i>
Particulars to be changed	<i>Change of principal business address from "12/F, Happy House,</i>		
	<i>9 Central Road, Central, Hong Kong" to "18/F, Top Building,</i>		
	<i>12 Middle Road, Central, Hong Kong".</i>		
Effective date (dd/mm/yyyy)	<i>15 / 10 / 2003</i>		

Name of associated entity		CE No. (if any)	
Particulars to be changed			
Effective date (dd/mm/yyyy)			

[Note: Your associated entity is required to complete relevant sections of *Form 6 – Notification - Associated Entity*.]

**If you have no other notifications, please go to Section 18.**

**Section 18: Declaration**

If you are a licensed corporation, registered institution, or corporate substantial shareholder of a licensed corporation, please complete Part A only.

If you are a licensed representative or an individual substantial shareholder of a licensed corporation, please complete Part B only.

**Part A**

***Corporation's declaration***

**We:** *Happy Securities Limited*

.....  
*Name of corporation*

Please insert the relevant section number and number of supplements here.

- **Have completed** section xx of this form and attached a total of x supplements and attachments to this form.
- **Declare** that all the information provided in this form (including all supplements and attachments) is complete, true and correct.
- **Understand** that providing false or misleading information is an offence under section 384 of the Securities and Futures Ordinance.
- **Understand** that the Commission may take disciplinary action against a person who has made a false or misleading representation.

***(To be signed by a director, responsible officer, executive officer, or chief executive (in the case of an authorized institution).)***

*CHAN Tai Man*

.....  
Name of ~~director~~/responsible  
officer/~~executive officer~~/chief executive\*

*CHAN Tai Man*

.....  
Signature

*20/10/2003*

.....  
Date

\* Delete where not applicable