

SUBSCRIPTION FORM
CORPORATION

Please type or print - Answer all questions

DETAILS OF APPLICANT:

Name of Company: _____

Registered Office Address: _____

Physical Address (if different): _____

Business Licence Registration No. _____ Company Registration No. _____

Contact Person: _____

Telephone: _____ Fax: _____

P. O. Box: _____ Email: _____

City: _____ Country: _____

Nature of Business: _____

Investment Amount: BS\$ _____

Source of Funds: _____

Beneficial Owner/Shareholder: _____

NIB No. _____ Passport No. _____ Expiration Date _____

Preferred contact method: Email Mail Hold Mail

BANK DETAILS:

Name on Bank Account: _____

Name of Bank: _____

Branch Location: _____

Account Number: _____

Please Turn over

TITAN FIXED INCOME FUND LIMITED

308 East Bay Street, 5th Floor • P. O. Box N-9058 • Nassau, Bahamas

Telephone: (242) 502-7020 Fax: (242) 393-5002

DECLARATION

<i>Note: Please initial <u>all</u> declarations</i>	Initial
1. I/We hereby acknowledge that I/We have read the TITAN FIXED INCOME FUND Offering Memorandum and accept the risks associated with the Fund.	
2. I/We declare that I/We am/are an eligible and accredited investor as defined in the offering Memorandum.	
3. I/We waive the right to be sent copies of the financial statement of the Fund, which shall be available at the registered office of the Fund for inspection.	

Authorized Signatory

Authorized Signatory

Date mm/dd/yy

Company Seal