

**HAITIAN INTERNATIONAL GROUP**

**STOCK PURCHASE APPLICATION**

Please purchase for me shares of HAITIAN INTERNATIONAL GROUP at \$10,000 US each.  
My check for \$ \_\_\_\_\_. \_\_\_\_ (minimum \$2,000) is enclosed to purchase full and fractional shares.  
I plan to make additional regular installments in the amount of \$ \_\_\_\_\_ monthly for a period of \_\_\_\_\_ months. I understand that my contribution shall not exceed fifteen (15%) per cent of the number of shares outstanding.

Please register my share as follows (PRINT):

\_\_\_\_\_  
Name of Applicant / Company

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Social Security or Tax Identification No.

\_\_\_\_\_  
Name of Co-owner (If Any)

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Social Security or Tax Identification No.

\_\_\_\_\_  
Street & Number

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
E-MAIL Address

(\_\_\_\_)\_\_\_\_\_  
Home Phone Number

(\_\_\_\_)\_\_\_\_\_  
Business Phone Number

I acknowledge that I am of legal age. I agree to the terms and provisions set forth on this application and in the by-laws.

\_\_\_\_\_  
Signature of Applicant or Officer /Title

\_\_\_\_\_  
Signature of Co-owner (If Any)

\_\_\_\_\_  
Date

Make check payable to HAITIAN INTERNATIONAL GROUP. Mail completed application along with check to:

**HAITIAN INTERNATIONAL GROUP  
40-02 BOWNE STREET, PMB 147  
FLUSHING, N.Y. 11354, USA**

**Do not write below this line**

Accepted:

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date