

## INTERMEDIARY PROFILE Date: Company Name : \_\_\_\_\_ Address: City and Country: E-mail: Web site: Phone: Fax: Position in the company: **BUSINESS INFORMATION** Areas of specialisation Industries served No. of employees Year of establishment International/European presence Existing business with Italian companies/public bodies/academia/others

Please complete this form and send it back by email (investment@centroestero.org) or fax (+39 011 696 5456)

(please specify)



## Information according with art 13 Legislative Decree No. 196 of 30 June 2003

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Date/	
Signature of the Legal Representative as consent to the above	