



POWERLINE FUNDING
ALTERNATIVE WORKING CAPITAL SOLUTIONS

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Rep Name : Ben Tanner

BUSINESS INFORMATION

Legal/Corporate Name Alliance Shipping Group, Inc.		DBA N/A	
Physical Address 1560 Sawgrass Corp Pkwy #400		City Sunrise	State FL
Mailing Address (if different from physical address) N/A		City	State
Telephone Number (954) 331-3260	Date Business Started (mo/day/yr) 10/31/2006	State of Incorporation Florida	Zip Code 33323
Fax Number (954) 331-8079	Hours of Operation 0900-17:00	Product/Service Sold Logistics & Shipping	
<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Other		Email Address	
Type of Business (Select One) <input type="checkbox"/> Retail <input type="checkbox"/> Wholesale <input type="checkbox"/> Business Services <input type="checkbox"/> Consumer Services <input type="checkbox"/> Restaurant/Bar <input checked="" type="checkbox"/> Other		Website Address allianceshippinggroup.com	

MERCHANT/OWNER INFORMATION

Corporate Officer/Owner Name Jaime Gullon		Title President		Length of Ownership 7 Years and 0 Months	
Home Address 22206 Bella Lago Dr		City Boca Raton	State FL	Zip Code 33433	Ownership % 100
Date of Birth (month/day/year) 7 / 5 / 65	Social Security Number 593-27-7609	Home Phone Number (954) 562-7659		Cell Phone Number (954) 304-2181	

PARTNER INFORMATION

Corporate Officer/Owner Name		Title		Length of Ownership ____ Years and ____ Months	
Home Address		City	State	Zip Code	Ownership %
Date of Birth (month/day/year)	Social Security Number	Home Phone Number		Cell Phone Number	

BUSINESS PROPERTY INFORMATION

Own/Lease Lease	Time at This Location 5 Years 0 Months	Monthly Rent or Mortgage \$ 1,400.00	Date Lease Ends (month/day/year) 10 / 31 / 2014
Business Landlord or Mortgage Bank Regus	Contact Name and/or Account No. Ashley Jankowski	Office/Mobile Number (954) 331-4600	

BUSINESS TRADE REFERENCES

Business Name Seaboard Marine	Contact or Account Number Delia Glez	Phone Number (305) 863-4533	Fax Number (305) 863-4778
Business Name Transdelta Serv.	Contact or Account Number Alberto	Phone Number (305) 463-7660	Fax Number (305) 463-7662
Business Name Amerijet Intl.	Contact or Account Number Rhonda	Phone Number (305) 593-5500	Fax Number (305) 718-8271

OTHER INFORMATION

Current Processing Company	No. of terms	Average Monthly Credit Card Sales	Average Monthly Total Sales (Cash, Check and Credit)
Requested Advance Amount \$ 25,000.00	Requested Daily Withholding credit card receipts) %	Highest Volume Months (please circle months, or N/A if no seasonality) Jan Feb Mar Apr May June July Aug Sep Oct Nov Dec N/A	
Prior/Current Cash Advance Company	Current Balance \$	Do you usually close the business during part of the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Details:	
Any open State/Federal Tax Liens Against Business or Owner? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Details:		Any Lawsuits or Judgments Pending against Business or Owner? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Details:	

Applicant authorizes POWERLINE FUNDING its assigns, agents, bank or financial institutions to obtain and investigative or consumer report from a credit bureau or a credit agency and to investigate the references given on any other statement or data obtained from applicant.

Applicant's Signature 10/30/2013 Date Co-Signature _____ Date _____