



CLIENT OPENING SURVEY FORM

Female
MR./MRS./MISS

josephine
FIRST NAME

Agapay
LAST NAME

8057049483
CONTACT NUMBER

574-405-1983
ALTERNATE NUMBER

COMPANY DATA BASE

libertyprestoza@gmail.com
EMAIL ADDRESS

Loanapp.com
COMPANY NAME

loanapp.com
WEBSITE URL

909 North Sepulveda Boulevard
Address

El Segundo
City

CA
State

90245
ZIP Code

Business Services, NEC
SIC DESCRIPTION

7389
SIC CODE

Independent
ENTITY TYPE

\$500,000 to \$999,999
COMPANY SALES

59,600.00
REVENUE (USD)

Los Angeles
COUNTRY/REGION

YES
MEDICAL INSURANCE



US Hwy 1 S, Saint Augustine, FL 32086 ,Plantation Island
Dr S, Saint Augustine, FL 32080



+1 (904) 117-
1782