



# CLIENT OPENING SURVEY FORM

Mr/Mrs/Miss

MR./MRS./MISS

Yoko

FIRST NAME

Fishburne

LAST NAME

203-506-4706

CONTACT NUMBER

203-840-8634

ALTERNATE NUMBER

## COMPANY DATA BASE

yoko@fishburne.com

EMAIL ADDRESS

Clinimetrics Research  
Associates, INC

COMPANY NAME

www.clinimetrics.com

WEBSITE URL

5285 Hellyer Ave

Address

San Jose

City

CA

State

95138

ZIP Code

Engineering & Management Services

SIC DESCRIPTION

8731

SIC CODE

Independent

ENTITY TYPE

Under \$500,000

COMPANY SALES

138,600.01

REVENUE (USD)

Santa Clara

COUNTRY/REGION

YES

MEDICAL INSURANCE



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



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1782