

CLIENT OPENING SURVEY FORM

Female	Melva	Burgess
MR./MRS./MISS	FIRST NAME	LAST NAME
9806369690		414-838-3151
CONTACT NUMBER		ALTERNATE NUMBER
	COMPANY DATA B	ASE
	Exit 11 Coffee House	
lvaburgess@hotmail.com	and Community	NA
EMAIL ADDRESS	Workspace	WEBSITE URL
	COMPANY NAME	
351 Jefferson Street Ste 120		
Address		
Washington	Missouri	63090-6449
City	State	ZIP Code
Cafes, Restaurants and Takeaw SIC DESCRIPTION	ay Food Services	T. L L A
451		Independent
SIC CODE		ENTITY TYPE
Under \$500,000		75,800.00
COMPANY SALES		REVENUE (USD)
Missouri		YES
COUNTRY/REGION		MEDICAL INSURANCE
•		©
US Hwy 1 S, Saint Augustine, FL 32086 ,Plantation Island Dr S, Saint Augustine, FL 32080		+1 (904) 117- 1782