



CLIENT OPENING SURVEY FORM

Female

MR./MRS./MISS

Lynna

FIRST NAME

Pulalasi

LAST NAME

7754204426

CONTACT NUMBER

212-311-6377

ALTERNATE NUMBER

COMPANY DATA BASE

loveyoudtp@yahoo.com

EMAIL ADDRESS

Video Equipment
Leasing Assoc

COMPANY NAME

http://www.gvcommunications.com

WEBSITE URL

1433 Powhatan St

Address

Alexandria

City

Virginia

State

22314-1343

ZIP Code

Motion Picture and Video Production

SIC DESCRIPTION

5511

SIC CODE

Independent

ENTITY TYPE

Under \$500,000

COMPANY SALES

508,800.03

REVENUE (USD)

Virginia

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