



CLIENT OPENING SURVEY FORM

Male
MR./MRS./MISS

Alberto
FIRST NAME

Martinez
LAST NAME

9563424192
CONTACT NUMBER

858-228-5683
ALTERNATE NUMBER

COMPANY DATA BASE

albertmtz08@aol.com
EMAIL ADDRESS

ROCHAARTS
COMPANY NAME

rochaarts.com
WEBSITE URL

20660 Bahama St
Address

Covina
City

CA
State

91723
ZIP Code

Miscellaneous Publishing
SIC DESCRIPTION

NA
SIC CODE

Independent
ENTITY TYPE

\$5,000,000 to \$9,999,999
COMPANY SALES

735,899.98
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

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1782