

## CLIENT OPENING SURVEY FORM

$\mathbf{Mr}$	$\mathbf{R}$	Wesiz
MR./MRS./MISS	FIRST NAME	LAST NAME
6195318210		6199296259
CONTACT NUMBER	ALTERNATE NUMBER	
	COMPANY DATA B	SASE
raweisz@talk21.com	Shimokaji & Assoc Pc	shimokaji.com
EMAIL ADDRESS	COMPANY NAME	WEBSITE URL
911 Research Drive		
Address		
Irvine	CA	92618
City	State	ZIP Code
Legal Services		
IC DESCRIPTION		
8111		Independent
SIC CODE		ENTITY TYPE
<b>Under \$500,000</b>		1,011,400.00
COMPANY SALES		REVENUE (USD)
Orange		YES
COUNTRY/REGION		MEDICAL INSURANCE
•		<u>©</u>
JS Hwy 1 S, Saint Augustine, F Dr S, Saint Augustine, FL 3208		+1 (904) 117- 1782