



CLIENT OPENING SURVEY FORM

Mr/Mrs/Miss

MR./MRS./MISS

Lezlie

FIRST NAME

CrRghsRd

LAST NAME

919-466-6762

CONTACT NUMBER

919-884-2446

ALTERNATE NUMBER

COMPANY DATA BASE

lezlie.craghead@craghead.org

EMAIL ADDRESS

Chang Sharon

COMPANY NAME

www.sharonchang.com

WEBSITE URL

4125 Casper Way

Address

Torrance

City

CA

State

90505

ZIP Code

Engineering & Management Services

SIC DESCRIPTION

8721

SIC CODE

Independent

ENTITY TYPE

\$500,000 to \$999,999

COMPANY SALES

500,000

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