

CLIENT OPENING SURVEY FORM

Mr/Mrs/Miss	Jolene	Ostolaza
MR./MRS./MISS	FIRST NAME	LAST NAME
757-682-7116		757-940-1741
CONTACT NUMBER	ALTERNATE NUMBER	
	COMPANY DATA B	ASE
jolene@yahoo.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
Under \$500,000		1,011,400.00
COMPANY SALES		REVENUE (USD)
Orange	YES	
COUNTRY/REGION		MEDICAL INSURANCE
•		•
JS Hwy 1 S, Saint Augustine, F. Dr S, Saint Augustine, FL 32080	•	+1 (904) 117- 1782