



CLIENT OPENING SURVEY FORM

Female
MR./MRS./MISS

Maria
FIRST NAME

Melendez
LAST NAME

2398231097
CONTACT NUMBER

401-885-7681
ALTERNATE NUMBER

COMPANY DATA BASE

elizabethmelsen@hotmail.com
EMAIL ADDRESS

Torgerson Noel
COMPANY NAME

lawfriend.com
WEBSITE URL

535 Anton Boulevard # 810
Address

Costa Mesa
City

CA
State

92626
ZIP Code

Legal Services

SIC DESCRIPTION

8111
SIC CODE

Independent
ENTITY TYPE

Under \$500,000
COMPANY SALES

881,399.99
REVENUE (USD)

Orange
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