



CLIENT OPENING SURVEY FORM

Mr/Mrs/Miss

MR./MRS./MISS

Marge

FIRST NAME

Limmel

LAST NAME

850-430-1663

CONTACT NUMBER

850-330-8079

ALTERNATE NUMBER

COMPANY DATA BASE

marge@gmail.com

EMAIL ADDRESS

Charles G Rojas INC

COMPANY NAME

www.1stchoicepestmanagement.com

WEBSITE URL

1245 Reamwood Ave

Address

Vista

City

CA

State

92084

ZIP Code

Business Services

SIC DESCRIPTION

7342

SIC CODE

Independent

ENTITY TYPE

Under \$500,000

COMPANY SALES

165,500

REVENUE (USD)

San Diego

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