



CLIENT OPENING SURVEY FORM

Mr

MR./MRS./MISS

Marco

FIRST NAME

Roggieri

LAST NAME

858-874-4493

CONTACT NUMBER

619-490-6601

ALTERNATE NUMBER

COMPANY DATA BASE

sales@packagingservicesltd.com

EMAIL ADDRESS

Core Mobility, INC

COMPANY NAME

www.coremobility.com

WEBSITE URL

8468 Melrose Pl

Address

NA

City

NA

State

NA

ZIP Code

Business Services

SIC DESCRIPTION

7371

SIC CODE

Independent

ENTITY TYPE

\$500,000 to \$999,999

COMPANY SALES

140,000

REVENUE (USD)

Santa Clara

COUNTRY/REGION

YES

MEDICAL INSURANCE



US Hwy 1 S, Saint Augustine, FL 32086 ,Plantation Island
Dr S, Saint Augustine, FL 32080



+1 (904) 117-
1782