

## CLIENT OPENING SURVEY FORM

Mr/Mrs/Miss	Christiane	sschosrgsr	
MR./MRS./MISS	FIRST NAME	LAST NAME	
602-690-4944	602-660-6894		
CONTACT NUMBER A		ALTERNATE NUMBER	
(	COMPANY DATA BASI	E	
	Asian Business		
istiane.eschberger@yahoo.com	<b>Association of Los</b>	http://www.uboc.com	
EMAIL ADDRESS	Angeles Inc	WEBSITE URL	
	COMPANY NAME		
767 N Hill St Ste 308			
Address			
Los Angeles	California	90012-2376	
City	State	ZIP Code	
Business and Professional Associa	ation Services		
SIC DESCRIPTION			
9551	Independent		
SIC CODE	ENTITY TYPE		
\$1,000,000 to \$4,999,999	88,600.00		
COMPANY SALES	REVENUE (USD)		
California	YES		
COUNTRY/REGION	MEDICAL INSURANCE		
<b>Q</b>		<b>&amp;</b>	
US Hwy 1 S, Saint Augustine, FL 32086 ,Plantation Island Dr S, Saint Augustine, FL 32080		+1 (904) 117- 1782	