

DBA Name	Beyond Institute Center Inc.	Legal Name	Beyond Institute Center Inc.	
Type of Business	Tech- School	Tax ID	453031635	Corp
Full Business Address	2921 Vineland Rd. Suite A Kissimmee FL 34746			
Full Billing Address				
Phone at Location	(407) 507-0016	Best Phone	(407) 729-4280	Fax (407) 507-3447
Business Email	beyond_career_center@yahoo.com	Website	www.beyondcareercenter.wix.com/beyond-carer-center	
Years In Business	5	Average Ticket		Gross Annual Sales 450,000.00
Do you currently have cash advance?	No	With who?		Balance
Current Credit Card Processor		Average Processing Volume		
Last Month Vol.		#of Tickets		2nd Month Vol.
				#of Tickets
3rd Month Vol.		#of Tickets		4th Month Vol.
				#of Tickets

<b>Owner #1 Name</b>	Sandra ROsario Pagan	Title	CEO
Date of Birth	09141971	SSN	584-33-2635
Full Home Address	6201 Lake Marion Gulf Resot Kissimmee FI 34758		
Home Phone	(407) 729-4280	Cell Phone	(407) 712-5661
Email	sandrariosario1124@live.com		
Own/Rent	\$ 0 Own	Years There	6 years
Drivers Lience #	R261780718340	State	FLorida
<b>Owner #2 Name</b>		Title	
Date of Birth		SSN	
Full Home Address			
Home Phone		Cell Phone	
Email			
Own/Rent	\$	Years There	
Drivers Lience #		State	

Business Home Based?	Yes	Location: Lease/Own	Leased	Lease Term	3 year	Monthly Rent	6,500.00
Landlord / Mortgage Co.	ARX Real Estate			Contact	Cindy Calluhan		
Contact Phone	(321) 591-6793	Cell	(321) 591-6793	Email	cindy@arxrealstate.com		

Bank Name/Branch	BB&T	Contact	Carlos Sosa	Phone	(407) 944-2300
Trade Reference#1	BSG	Contact	Jeanie	Phone	(407) 973-6560
Trade Reference#2	Sallys Supplies	Contact	Barbara	Phone	(409) 933-2055
Trade Reference#3	BB&T	Contact	Aida	Phone	(407) 944-2300

I hereby represent that all the above information is true and understand that making false statements might be considered fraud. By providing the above information, the applicant(s) authorize you to whom this application is made or your agents to investigate my/our financial responsibility and credit worthiness, specifically principal and corporate entities, and will provide financial statements, tax returns, etc. as you deem necessary. A photocopy of this authorization will be deemed as acceptable for release of credit information. I/We authorize Money Works Direct, Inc. to receive pertinent information regarding the commercial lease for the above referenced location from my leasing company and or agent. I/we authorize you to update my/our credit profile from time to time in the future, as you deem appropriate. By signing below, each of the above listed business and business owner/officer (individually and collectively, "you") authorize Money Works Direct and each of its representatives, successors, assigns and designees ("Recipients") that may be involved with or acquire commercial loans having daily repayment features or purchases of future receivables including Merchant Cash Advance transaction, including without limitation the application therefor (collectively, "Transaction") to obtain consumer or personal, business and investigative reports and other information about you, including credit card processor statements and bank statements, from one or more consumer reporting agencies, such as TransUnion, Experian and Equifax, and from other credit bureaus, banks, creditors and other third parties. You also authorize Money Works Direct to transmit this application form, along with any of the foregoing information obtained in connection with this application, to any or all of the Recipients for the foregoing purposes. You also consent to the release, by any creditor or financial institution, of any information relating to any of you, to Money Works Direct and to each of the Recipients, on its own behalf.

Signature#1

Printed Name

Sandra ROsario Pagan

Date

10/13/2016