

DBA Name		monkeybusiness bar		Le	gal Name	wilton manors group llc		
Type of Business		bar club		Ta	x ID	27-4172002		LLC
Full Business Addre	SS	2740 andrev	vs ave					
Full Billing Address								
Phone at Location		(954) 514-7819		В	Sest Phone		Fax	
Business Email		gustavo525	@aol.com		Website			
Years In Business		14	Average ⁻	Ticket		Gross Annual Sa	ales <u>100,000.00</u>	
Do you currently ha	ave cash	n advance?	Yes	With who? ca	apify		Balance 10,000	
Current Credit Card	l Proces	sor			Average	Processing Volur	me	
Last Month Vol.		#o	f Tickets		2nd Month Vol.		#of Tickets	
3rd Month Vol.		#o	f Tickets		4th Month Vol.		#of Tickets	
Owner #1 Name	gustavo	sanchez		Title	owner man	ager		
Date of Birth	gustavo	525@aol.com		SSN	098-68-821	17		
Full Home Address	808 ne	62nd ct						
Home Phone	(954) 6	38-7547	Cell Phone		Email	gustavo5	525@aol.com	
Own/Rent	\$ <u>0 Ov</u>	vn	Years There	14Dr	ivers Lience # s5	22-280-66-185-0	State florida	
Owner #2 Name				Title				
Date of Birth				— SSN				
Full Home Address								
Home Phone			Cell Phone		Email			
Own/Rent	\$		Years There	Dr	ivers Lience #		State	
			-		_			
Business Home Bas	ed?	No Loc	ation: Lease/Ov	vn <u>Leased</u>	Lease Tern	າ	Monthly Rent	
Landlord / Mortgage	e Co.	asia lucchese			Conta	ct <u>9</u>	54-881-1103	
Contact Phone		(954) 881-110	<u>3</u> C	Cell		Email		
Bank Name/Branch	banko	famerica	Contac			Phone		
Trade Reference#1			 Contac	 :t		Phone		
Trade Reference#2			 Contac			– Phone		
Trade Reference#3			Contac			– Phone		
I hereby represent that all	the above	information is true	and understand that	making false state	ements might he cons	idered fraud. By prov	iding the above information	the annlicant(s)

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 pertinet 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 aboe listed business and business ownet/officer (individually and collectiverly, "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 transcation, including without limitation the application therefor (collectively, "Transcation") 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	gustavo sanchez	Date	03/20/2017