

DBA Name		Annabella truckir	ng inc	Legal	Name	Annabella tru	ucking inc	
Type of Business		Transportation				46-3827479		Corp
Full Business Addres	SS 4	460 e lexington av	ve #A el cajon	ca 92020				·
Full Billing Address	_		•					
Phone at Location (619) 357-7610			Best	Phone (619) 9	962-9260	Fax		
Business Email	Sevan_koza@yaho		noo.com		Website			
Years In Business	<u>:</u>	3	Average Tick	et		Gross Annual Sales 60,000.00		
Do you currently ha	ve cash a	idvance?	No W	ith who?			Balance	
Current Credit Card Processor Average Processing Volume						ume		
Last Month Vol.		#of Tick	cets	2n	d Month Vol.		#of Tickets	
3rd Month Vol.		#of Tick	ets	4th	n Month Vol.		#of Tickets	
Owner #1 Name	Savean Ko	173		Title	Owner			
<u> </u>	05/20/198			SSN	607-71-8886	 5		
_	460 e lexington ave #a el cajon ca 92020							
_	(619) 962-	· ·		(619) 962-9260	Email	sevan	_koza@yahoo.com	
- Own/Rent	\$ 0 Rent	Years	There 3		 rs Lience # D74		State Ca	
Owner #2 Name				Title				
Date of Birth				SSN				
Full Home Address								
Home Phone		Cell P	hone _		Email			
Own/Rent	\$	Years	There	Drive	s Lience #		State	
Business Home Base	ed?	Yes Location	: Lease/Own	Leased	Lease Term		Monthly Rent	1,150.00
Landlord / Mortgage	Co.	_			— Contact	t	Armin	
Contact Phone	_		Cell	(619)	395-1664	Email		
Bank Name/Branch	Chace		Contact			Phone		
Trade Reference#1	Friend		- Contact	Asiel tomika	1	Phone	(619) 277-6779	
Trade Reference#2	Friend		Contact	Sam		Phone	(619) 792-6068	
Trade Reference#3	Cousin		- Contact -	Tony		Phone	(619) 277-4269	

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	Savean Koza	Date	05/01/2017