

DBA Name	SGA Fabrications		Legal Name	SGA Managementinc.com	
Type of Business	Construction Trade Services		Tax ID	27-2954382	Corp
Full Business Address	1709 NW 79 Ave				
Full Billing Address					
Phone at Location	(786) 294-0085		Best Phone	(786) 395-4281	Fax (866) 523-5004
Business Email	Elvis@sgamanagementinc.com		Website	Stealbeamscolumns.com & stairsgates railings.com	
Years In Business	9	Average Ticket		Gross Annual Sales	2,100,000.00
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.	
3rd Month Vol.		#of Tickets		4th Month Vol.	

<b>Owner #1 Name</b>	Elvis Sicard		Title	president	
Date of Birth	04041976		SSN	769-10-2098	
Full Home Address	10795 SW 108 Ave				
Home Phone	(786) 395-4281	Cell Phone	(786) 395-4281	Email	elvis@sgamanagementinc.com
Own/Rent	\$ 0 Rent	Years There	4	Drivers Lience #	S263-201-76-124-0 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?	No	Location: Lease/Own	Leased	Lease Term	Monthly Rent
Landlord / Mortgage Co.	PS Business Parks		Contact	Sonia Garcia	
Contact Phone	(305) 590-1515	Cell		Email	sgarcia@psbusinessparks.com

Bank Name/Branch	City National Bank of Flo	Contact	Carlos	Phone	(305) 383-5323
Trade Reference#1	Everglades Steel	Contact	Ralph Rodriguez	Phone	(305) 591-9460
Trade Reference#2	Infra Metals	Contact	Gloria Moncada	Phone	(800) 693-1361
Trade Reference#3	control Products of South	Contact	Dean Brown	Phone	(954) 327-1231

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

Elvis Sicard

Date

01/10/2019