

DBA Name		subor limo se	orvicos	Loo	val Nama	sybor lime so	rvicos	
		cyber limo se			gal Name	cyber limo se	ivices	
Type of Business			on.furnished apart		x ID	461381058		LLC
Full Business Addre	SS	4303 elliot ct	woodbridge va 22	2193				
Full Billing Address								
Phone at Location		(571) 338-07		Be	est Phone (571)	338-0753	Fax	
Business Email		cyber1949@	gmail.com		Website	internet		
Years In Business		2012	Average Tic	ket		Gross Annual	Sales <u>500,000.00</u>	
Do you currently ha	ave cash	advance?	No W	/ith who?			Balance	
Current Credit Card Processor					Average F	Processing Volu	ume	
Last Month Vol.		#of	Tickets		2nd Month Vol.		#of Tickets	
3rd Month Vol.		#of	Tickets		4th Month Vol.		#of Tickets	
Owner #1 Name	hassan 6	elghabbar		Title	owner man	ager		
Date of Birth				SSN	225-95-964			
Full Home Address	march 10.1949 SSN 225-95-9644 4303 elliot ct dale city va 22193							
Home Phone	(703) 83			(571) 338-07	53 Email	cyher1	949@gmail.com	
Own/Rent	\$ 0 Ow		Years There 8			1392919	State va	
	*		<u></u>					
Owner #2 Name				Title				
Date of Birth				SSN				
Full Home Address								
Home Phone		(Cell Phone		Email			
Own/Rent	\$		Years There	Dri	vers Lience #		State	
Business Home Bas	ed?	Yes Loca	tion: Lease/Own	Owned	Lease Term	1	Monthly Rent	
Landlord / Mortgage	- Co <u>c</u>	chevy chase			 Contac	ct	chevy chase	
Contact Phone	<u>(</u>	(800) 848-9136	Cell	(80	0) 848-9136	_ Email	cyber1949@g	mail.com
Bank Name/Branch	wells fa	argo	Contact	duke st a	lexandria va	Phone	(800) 225-5935	
Trade Reference#1	1		Contact	1		– Phone	(800) 225-5935	
Trade Reference#2			Contact			– Phone		
Trade Reference#3			Contact			– Phone –		

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	hassan elghabbar	Date	03/11/2017