

DBA Name	·	aurant & Lounge	Legal Name	Zomano Cafes, Inc					
Type of Business Food & Beverage		erage	Tax ID	26-0296371	_ Corp				
Full Business Address 1790 Highway A1A Unit 105-108, Satellite Beach, FL 32937									
Full Billing Address									
Phone at Location (321) 779-3605		505	Best Phone (321)	537-2001 Fax	(321) 779-3652				
Business Email	cuizinerestaurant@gmail.co		Website	<u>cuizinerestaurant.com</u>					
Years In Business	2	Average Tick		Gross Annual Sales 655	ss Annual Sales <u>655,000.00</u>				
Do you currently ha	ave cash advance?	Yes W	ith who? Can Capital	Balance	28,000				
Current Credit Card Processor Average Processing Volume									
Last Month Vol.	#of Tickets		2nd Month Vol.	#of Tick	#of Tickets				
3rd Month Vol.	#of	#of Tickets 4th Month Vol #of Tickets		ets					
Owner #1 Name	Zoran Stanoikovski		Title Owner Onl						
	Zoran Stanojkovski			Title Owner Only					
Date of Birth	06-29-1972 SSN 767-03-7104								
Home Phone	full Home Address 7981 Old Tramway Drive, Melbourne, FL 32940								
	(321) 537-2001 Cell Phone (321) 537-2001 Email zstanojkovski@aol.com								
Own/Rent	\$ <u>0 Rent</u> Years There <u>5</u> Drivers Lience # <u>S352-980-72-229-0</u> State <u>Florida</u>								
Owner #2 Name Title									
Date of Birth		_	SSN						
Full Home Address									
Home Phone	Cell Phone Email								
Own/Rent	\$	Years There	Drivers Lience #	State					
Business Home Bas	ed? No Loca	ation: Lease/Own	Leased Lease Tern	n 4 years Monthly	Rent 4,800.00				
Landlord / Mortgage			Conta	ct Michael How	ard				
Contact Phone	(321) 508-3588	B Cell		Email					
Bank Name/Branch Wells Fargo Contact		Veronica Lepri	Phone (321) 984-5						
Trade Reference#1	Independance Seafoo	d Contact	Mike	Phone (561) 827-1	157				
Trade Reference#2	R.L Schreiber	Contact	Bill	Phone (321) 693-5	995				
Trade Reference#3	GFS Market Place	Contact	Jacob	Phone (321) 726-9	475				

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	Zoran Stanojkovski	Date	08/23/2016
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