

DBA Name	Mida	s limo	Le	egal Name	Midas limo inc	
Type of Business Car serivis		serivis Ta		ax ID	262791412	Corp
Full Business Addre	ss 4650	sepulvda blvd#209 sh	erman oaks ca	a 91403		
Full Billing Address						
Phone at Location (818) 968-8898		Best Phone (818) 968-8898 Fax		1X		
Business Email info@midasli		midaslimo.com		Website	Wwwmifaslimo.com	1
Years In Business	2008	Average	Ticket		Gross Annual Sales	10,000.00
Do you currently ha	ave cash advand	ce? No	With who? _			Balance
Current Credit Card	d Processor			Average	Processing Volume	
Last Month Vol.		#of Tickets		2nd Month Vol.	#	of Tickets
3rd Month Vol.		#of Tickets		4th Month Vol.	#	of Tickets
Owner #1 Neme	Shmuel Dorani		Title	Owner		
Owner #1 Name Date of Birth	051054		Title SSN	Owner 621-30-62	110	
Full Home Address	4650 Sepulveda	Blvd			.13	
Home Phone	(818) 968-8898	Cell Phone	(818) 968-8	 898 Email	info@midaslin	
Own/Rent	\$ 0 Own		8189688898 D		.7286266 Stat	
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Owner #2 Name			Title			
Date of Birth			 SSN			
Full Home Address						
Home Phone		Cell Phone		Email		
Own/Rent	\$	Years There	D	rivers Lience #	Stat	.e
Business Home Bas	sed? No	Location: Lease/Ov	wn Leased	Lease Teri	m M	Ionthly Rent
Landlord / Mortgage	e Co.			 Conta		
Contact Phone			Cell		Email	
Bank Name/Branch		Contac	ct		Phone	
Trade Reference#1		Contac	ct		Phone	
Trade Reference#2		Contac	ct		Phone	
Trade Reference#3		Contac	ct		Phone	
I hereby represent that all	the above information	n is true and understand tha	t making false stat	tements might be con	sidered fraud. By providing t	the above information, the applicant(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	Shmuel Dorani	Date	12/02/2019