

DBA Name		XTREME MOTO	RS	Le	egal Name	RB AUTO CORP		
Type of Business		USED CAR DEALER & SERVICE		т	ax ID	660837924	Corp	
Full Business Addre	SS	436 AVE 65 INFA	ANTERIA					
Full Billing Address								
Phone at Location		(787) 514-9274		1	Best Phone (787) 616-4725 Fa	х	
Business Email		xmotors.riopiedras@gmail.com		<u>n</u>	Website	www.xtrememotors	pr.com	
Years In Business		<u>5</u> Averag		Ticket		Gross Annual Sales	750,000.00	
Do you currently h	ave cash a	advance?	No W	/ith who? _		E	Balance	
Current Credit Card Processor					Average	Processing Volume		
Last Month Vol.		#of Tio	ckets		2nd Month Vol.	#	of Tickets	
3rd Month Vol.		#of Tio	ckets		4th Month Vol.	#	of Tickets	
Owner #1 Name	EVARISTO	RIVERA		Title	PRESIDEN	Т		
Date of Birth	10261948	3		SSN	583-36-14	60		
Full Home Address	Home Address CARR 723 KM 9.6 BO HAYALES COAMO PR 00769							
Home Phone	(787) 616	i-4725 Cell	Phone		Email	xmotors.riopie	dras@gmail.com	
Own/Rent	\$ <u>0 Own</u>	Yea	ars There 5	D	rivers Lience # $\frac{6}{}$	41991 Stat	e <u>PR</u>	
O 4/2 No				T !ul -				
Owner #2 Name				Title				
Date of Birth				SSN				
Full Home Address Home Phone		Cell	Phone		 Email			
Own/Rent	\$		ars There		rivers Lience #	Stat		
Ownyrtene	Ψ					5tat		
Business Home Bas	ed?	No Locatio	n: Lease/Own	Owned	Lease Teri	mM	onthly Rent	
Landlord / Mortgage	e Co				Conta			
Contact Phone	_		Cell			Email		
Bank Name/Branch			Contact			Phone		
Trade Reference#1			— Contact			 Phone		
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	EVARISTO RIVERA	Date	01/28/2020