

```
=====
BUS ID:      11055          BUS NAME:    3 IN 1 AUTO BROKERS          TOTAL LICENSES:      1
=====
```

```
BUS ADD'L:
BUS TYPE:    COMMERCIAL  --  COMMERCIAL BUSINESS
BUS STATUS:  Active
```

BUSINESS INFORMATION

```
-----
Business Address:          Billing/Mailing Address:
-----
3 IN 1 AUTO BROKERS      3 IN 1 AUTO BROKERS
6472 CHURCH ST           6472 CHURCH ST
                           ATTN: BUSINESS OWNER
DOUGLASVILLE, GA 30134 DOUGLASVILLE, GA 30134

Ph:    (470) 629-8016     Ph:
Fax:                                       Fax:
Car-Rt:                          Car-Rt:

Business Contact:
-----
Name:  RONALDA P. MANASSE      Name 2:GVENS MONASSE
Ph:    (561) 757-6087
Email: RONALDAPAILLANT@YAHOO.COM
```

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=====
BUS ID:      11052          BUS NAME:    AMERICAN FAMILY INSURANCE    TOTAL LICENSES:      1
=====
```

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BUS ADD'L:
BUS TYPE:    COMMERCIAL  --  COMMERCIAL BUSINESS
BUS STATUS:  Active
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BUSINESS INFORMATION

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-----
Business Address:          Billing/Mailing Address:
-----
AMERICAN FAMILY INSURANCE AMERICAN FAMILY INSURANCE
3312 HWY. 5               3312 HWY. 5
                           ATTN: BUSINESS OWNER
DOUGLASVILLE , GA 30135 DOUGLASVILLE , GA 30135

Ph:    (770) 250-1998     Ph:    (770) 250-1998
Fax:                                       Fax:
Car-Rt:                          Car-Rt:

Business Contact:
-----
Name:  ILENE LEVINE          Name 2:
Ph:    (770) 250-1998
Email: ILEVINE@AMFAM.COM
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=====
BUS ID:      11051          BUS NAME:    CAVE SPRINGS PACKAGE          TOTAL LICENSES:      3
=====
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BUS ADD'L:
BUS TYPE:    COMMERCIAL  --  COMMERCIAL BUSINESS
BUS STATUS:  Active
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BUSINESS INFORMATION

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-----
Business Address:          Billing/Mailing Address:
-----
SHRI VIHAAN, INC.        SHRI VIHAAN, INC.
913 DALLAS HWY           913 DALLAS HWY
                           ATTN: BUSINESS OWNER
DOUGLASVILLE, GA 30134 DOUGLASVILLE, GA 30134

Ph:
Fax:
Car-Rt:                          Ph:
                                   Fax:
                                   Car-Rt:
```

Business Contact:

Name: NICK PATEL
Ph: (678) 571-5707
Email: NTP31@YAHOO.COM

Name 2: POONAM PATEL

=====
BUS ID: 11058 BUS NAME: COLDWATER DOUGLASVILLE CAR WASH, LLC TOTAL LICENSES: 1
=====

BUS ADD'L:
BUS TYPE: COMMERCIAL -- COMMERCIAL BUSINESS
BUS STATUS: Active

BUSINESS INFORMATION

Business Address:

COLDWATER DOUGLASVILLE CAR WASH, LLC
2777 CHAPEL HILL RD

DOUGLASVILLE , GA 30135

Billing/Mailing Address:

COLDWATER DOUGLASVILLE CAR WASH, LLC
3135 S. RICHMOND ST
ATTN: BUSINESS OWNER
SALT LAKE CITY, UT 84106

Ph:
Fax:
Car-Rt:

Ph:
Fax:
Car-Rt:

Business Contact:

Name: JARED RICHARDS
Ph: (801) 232-5367
Email: JARED@COLDWATERCAP.COM

Name 2: RYKER MORRIS

=====
BUS ID: 11060 BUS NAME: DARLINGTON GROUP CONSTRUCTION, LLC TOTAL LICENSES: 1
=====

BUS ADD'L:
BUS TYPE: RESIDENTIAL -- RESIDENTIAL BUSINESS
BUS STATUS: Active

BUSINESS INFORMATION

Business Address:

VALENCIA DARLINGTON
4875 WINTERVIEW LANE

DOUGLASVILLE , GA 30135

Billing/Mailing Address:

DARLINGTON GROUP CONSTRUCTION, LLC
4875 WINTERVIEW LANE
ATTN: BUSINESS OWNER
DOUGLASVILLE , GA 30135

Ph: (470) 455-4061
Fax:
Car-Rt:

Ph:
Fax:
Car-Rt:

Business Contact:

Name: VALENCIA DARLINGTON
Ph: (470) 455-4061
Email: VALENCIA@DARLINGTONGRP.COM

Name 2:

=====
BUS ID: 11061 BUS NAME: DOUGLASVILLE FURNITURE, INC TOTAL LICENSES: 1
=====

BUS ADD'L:
BUS TYPE: COMMERCIAL -- COMMERCIAL BUSINESS
BUS STATUS: Active

BUSINESS INFORMATION

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-----
Business Address:
-----
DOUGLASVILLE FURNITURE, INC
2115 FAIRBURN RD.

DOUGLASVILLE , GA 30135

Ph: (770) 533-1849
Fax:
Car-Rt:

Billing/Mailing Address:
-----
DOUGLASVILLE FURNITURE, INC
2115 FAIRBURN RD.
ATTN: BUSINESS OWNER
DOUGLASVILLE , GA 30135

Ph: (770) 533-1849
Fax:
Car-Rt:

Business Contact:
-----
Name: MOHAMED ABUNDOKAIRA
Ph: (770) 533-1849
Email: MABN17@HOTMAIL.COM

Name 2:

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=====
BUS ID: 11053 BUS NAME: DRISS MOBILE MECHANIC TOTAL LICENSES: 1
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BUS ADD'L:
BUS TYPE: RESIDENTIAL -- RESIDENTIAL BUSINESS
BUS STATUS: Active

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BUSINESS INFORMATION

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-----
Business Address:
-----
DRISS MOBILE MECHANIC
8182 CAMP ST UNIT A

DOUGLASVILLE, GA 30134

Ph: (770) 837-1759
Fax:
Car-Rt:

Billing/Mailing Address:
-----
DRISS MOBILE MECHANIC
8182 CAMP ST UNIT A
ATTN: BUSINESS OWNER
DOUGLASVILLE, GA 30134

Ph: (770) 837-1759
Fax:
Car-Rt:

Business Contact:
-----
Name: DRISS LEKHAL
Ph: (770) 837-1759
Email: DRISSLEKHA57@GMAIL.COM

Name 2:

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=====
BUS ID: 11059 BUS NAME: HEALTH PLUS MEDICAL INSTITUTE, LLC TOTAL LICENSES: 1
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BUS ADD'L:
BUS TYPE: COMMERCIAL -- COMMERCIAL BUSINESS
BUS STATUS: Active

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BUSINESS INFORMATION

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-----
Business Address:
-----
HEALTH PLUS MEDICAL INSTITUTE, LLC
8323 OFFICE PARK DR SUITE C

DOUGLASVILLE, GA 30134

Ph: (770) 675-8190
Fax: (770) 485-0838
Car-Rt:

Billing/Mailing Address:
-----
HEALTH PLUS MEDICAL INSTITUTE, LLC
8323 OFFICE PARK DR SUITE C
ATTN: BUSINESS OWNER
DOUGLASVILLE, GA 30134

Ph:
Fax:
Car-Rt:

Business Contact:
-----
Name: LINDA SAKOR
Ph: (770) 490-2634
Email: INFO@HEALTHPLUSMEDICALINSTITUTE.NET

Name 2:TERENCE SAKOR

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=====
BUS ID: 11050 BUS NAME: I DESERVE MENTAL WELLNESS SERVICES TOTAL LICENSES: 1
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BUS ADD'L:
BUS TYPE: RESIDENTIAL -- RESIDENTIAL BUSINESS
BUS STATUS: Active

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BUSINESS INFORMATION

Business Address:

I DESERVE MENTAL WELLNESS SERVICES
7062 SKIPPINGSTONE WAY

DOUGLASVILLE, GA 30134

Ph: (404) 482-0499
Fax:
Car-Rt:

Billing/Mailing Address:

I DESERVE MENTAL WELLNESS SERVICES
7062 SKIPPINGSTONE WAY
ATTN: BUSINESS OWNER
DOUGLASVILLE, GA 30134

Ph: (404) 482-0499
Fax:
Car-Rt:

Business Contact:

Name: SHENNE BEND
Ph: (404) 482-0499
Email: SBEND@PREGNANCYTHERAPIST.COM

Name 2:

=====
BUS ID: 11049 BUS NAME: INFINITE POTENTIAL FINANCIAL CONSULTING LLC TOTAL LICENSES: 1
=====

BUS ADD'L:
BUS TYPE: RESIDENTIAL -- RESIDENTIAL BUSINESS
BUS STATUS: Active

BUSINESS INFORMATION

Business Address:

JANITA KAEMBEA JACKSON
5501 SOMER RIDGE CT

DOUGLASVILLE, GA 30134

Ph: (888) 486-0228
Fax: (770) 672-7577
Car-Rt:

Billing/Mailing Address:

INFINITE POTENTIAL FINANCIAL CONSULTING LLC
7421 DOUGLAS BLVD STE N281
ATTN: BUSINESS OWNER
DOUGLASVILLE, GA 30135

Ph:
Fax:
Car-Rt:

Business Contact:

Name: JANITA JACKSON
Ph: (678) 848-0840
Email: INFO@INFINITEPOTENTIALFINANCIAL.COM

Name 2:

=====
BUS ID: 11054 BUS NAME: MAVIS TIRES AND BRAKES TOTAL LICENSES: 1
=====

BUS ADD'L:
BUS TYPE: COMMERCIAL -- COMMERCIAL BUSINESS
BUS STATUS: Active

BUSINESS INFORMATION

Business Address:

MAVIS TIRE SUPPLY, LLC
7412 DOUGLAS BLVD

DOUGLASVILLE, GA 30135

Ph: (914) 984-2500
Fax:
Car-Rt:

Billing/Mailing Address:

MAVIS TIRE SUPPLY, LLC
358 SAW MILL RIVER RD.
ATTN: BUSINESS OWNER
MILLWOOD, NY 10546

Ph:
Fax:
Car-Rt:

Business Contact:

Name: DAVID SORBARO
Ph: (914) 984-2500
Email: EHARRIS@MAVISTIRE.COM

Name 2:

=====
BUS ID: 11057 BUS NAME: ON THE LEVEL, INC. TOTAL LICENSES: 1
=====

BUS ADD'L:
BUS TYPE: RESIDENTIAL -- RESIDENTIAL BUSINESS
BUS STATUS: Exempt

BUSINESS INFORMATION

Business Address:

ON THE LEVEL, INC.
5845 SLOANE ST

DOUGLASVILLE , GA 30135

Ph: (678) 895-7611
Fax:
Car-Rt:

Business Contact:

Name: GATHAN WILKINS
Ph: (678) 895-7611
Email: GATHANWILKINS1@YAHOO.COM

Billing/Mailing Address:

ON THE LEVEL, INC.
PO BOX 238
ATTN: BUSINESS OWNER
DOUGLASVILLE, GA 30133

Ph: (678) 895-7611
Fax:
Car-Rt:

Name 2:STEPHEN THOMAS

=====
BUS ID: 11056 BUS NAME: THE HEALING PLACE TOTAL LICENSES: 1
=====

BUS ADD'L:
BUS TYPE: RESIDENTIAL -- RESIDENTIAL BUSINESS
BUS STATUS: Active

BUSINESS INFORMATION

Business Address:

THE HEALING PLACE
8130 DURALEE LN

DOUGLASVILLE, GA 30134

Ph: (770) 674-8044
Fax:
Car-Rt:

Business Contact:

Name: NAKEYA GORE
Ph: (770) 912-1011
Email: NAKEYA@HEALING-PLACE.ORG

Billing/Mailing Address:

THE HEALING PLACE
8130 DURALEE LN
ATTN: BUSINESS OWNER
DOUGLASVILLE, GA 30134

Ph:
Fax:
Car-Rt:

Name 2:

TOTALS -- Businesses: 13 Licenses: 15