

Salesability Inc.

Salesability Inc.



14377 US HWY 19 N. CLEARWATER, FL 33764

Salesability Inc.

FINANCES



SOLAR



WINDOWS



INSULATION

*SOFFIT + FASCIA
&
SIDING*



Salesability Inc.

Established in 1984, Salesability Inc provides marketing and financing for home Improvements. Salesability has private investors that earn up to 12% interest Annually on their principal investment. Salesability's loans are secured by Retail Installments, UCC1, and Promissory Notes. Investment funds and interest are secured by Company Promissory note and Personal Guarantee. Interest earned is paid monthly. Payment are made 5th of each month.

Salesability has ten full time employees. Six are part of our marketing team and four are in our financing department.

Salesability Inc.

LICENSES

STATE OF FLORIDA OFFICE OF FINANCIAL REGULATION 200 EAST GAINES STREET, TALLAHASSEE, FLORIDA 32399-0375 PHONE (850)410-9895 WWW.FLOFR.COM/LICENSING		516497
HOME IMPROVEMENT FINANCE SELLER LICENSE THE HOME IMPROVEMENT FINANCE SELLER INDICATED BELOW IS LICENSED UNDER THE PROVISIONS OF CHAPTER 520, FLORIDA STATUTES. EFFECTIVE DATE: 01/01/07 EXPIRATION DATE: 12/31/08		
BUSINESS LOCATION: 14377 US HWY 19 N STE 200 CLEARWATER, FL 34624	AUDIT NUMBER HI 0700054	
SALESABILITY INC 14377 US HIGHWAY 19 N STE 200 CLEARWATER, FL 33764-7245		
COMMISSIONER, OFFICE OF FINANCIAL REGULATION		

STATE OF FLORIDA OFFICE OF FINANCIAL REGULATION 200 EAST GAINES STREET, TALLAHASSEE, FLORIDA 32399-0375 PHONE (850)410-9895 WWW.FLOFR.COM/LICENSING		516435
RETAIL INSTALLMENT SELLER LICENSE THE RETAIL INSTALLMENT SELLER INDICATED BELOW IS LICENSED UNDER THE PROVISIONS OF CHAPTER 520, FLORIDA STATUTES. EFFECTIVE DATE: 01/01/07 EXPIRATION DATE: 12/31/08		
BUSINESS LOCATION: 14377 US HWY 19 N STE 200 CLEARWATER, FL 33764	AUDIT NUMBER RS 0701591	
SALESABILITY INC 14377 US HWY 19 N STE 200 CLEARWATER, FL 33764		
COMMISSIONER, OFFICE OF FINANCIAL REGULATION		

Business Search Results

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Business Search Results

Notice: The licensee identified below is authorized to conduct business as indicated by the license type. To determine the exact dates of active licensure be sure to review the "effective date" and the "expiration date". You may print this screen as evidence of licensure.

License Name: SALESABILITY INC
License Type: HI

Status: Active
Audit: HI 0900030
Reg. License ID: LI00000037572
Initial Effective Date: August 20, 1997
Expiration Date: December 31, 2010
Disciplinary Action Indicator: None

Branch
Number: 000000

Business
Address: 14377 US HWY 19 N STE 200
CLEARWATER
34624

Phone
Number: (727) 531-8644

E-Mail
Address: None

Mailing
Address: 14377 US HIGHWAY 19 N STE 200
CLEARWATER FL
33764-7245

HELP

Salesability Inc.

Salesability's loans secured by

UCC1

Retail installment

Promissory Note

Salesability Inc.

SDA926 (7/02) (FL)

RETAIL INSTALMENT CONTRACT (Home Solicitation Sales)

NOTICE TO THE BUYER: (a) Do not sign this contract before you read it or if it contains any blank spaces. (b) You are entitled to an exact copy of the contract you sign. Keep it to protect your legal rights.

Dear Customer: We've written this Retail Instalment Contract in simple and easy-to-read language because we want you to understand its terms. Please read your contract carefully and feel free to ask us any questions you may have about it. We use the words you and your to mean the Buyer. In the Insurance Statement, I mean the one of you who is the principal income earner. In this Retail Instalment Contract, and in the Arbitration Agreement on the reverse side, the words we, us and our refer to the Seller indicated below, and any successor(s), transferee(s) or assignee(s) of the Seller.

BUYER'S NAMES:	Last Name	First Name	Middle Initial	1. DESCRIPTION OF GOODS SOLD	SERIAL NO.	CASH PRICE INCLUDING SALES TAX
	Last Name	First Name	Middle Initial			
Street Address						
	City	State Abbr.	Zip			
Signed At:	(City and State)					
Creditor (Seller):	(Seller's Name)					
Seller's Address:	(Street, City, State, Zip)					
By:	(Name, Officer or Firm Member)			Date of Contract:		

PROPERTY DESCRIPTION	ITEMIZATION OF AMOUNT FINANCED
	2. CASH PRICE (Total) \$
	3. AMOUNT PAID TO OTHERS ON YOUR BEHALF To State Officials for Filing Fee \$
	4. SUBTOTAL (2 & 3) \$
	5. A. CASH DOWNPAYMENT \$
	B. TRADE-IN (Description) \$
	TOTAL DOWNPAYMENT (A & B) \$
	6. SUBTOTAL (4 - 5) \$
	7. AMOUNTS PAID TO INSURANCE COMPANIES FOR CREDIT INSURANCE AND PROPERTY INSURANCE:
	A. Life Insurance* \$
	B. Accident and Health Insurance* \$
	C. Property Insurance* \$
	TOTAL (A & B & C) \$
	* We may be retaining a portion of this amount.
	8. UNPAID BALANCE (6 & 7) \$
	9. AMOUNT PAID TO PUBLIC OFFICIALS FOR DOCUMENTARY STAMP TAX \$
	10. AMOUNT FINANCED (8 & 9) \$
	11. FINANCE CHARGE \$
	12. TOTAL OF PAYMENTS (10 & 11) \$
	13. TOTAL SALE PRICE (8 & 12) \$

CHARGE ACCRUAL DISCLOSURE

This is a _____ days "Some As Cash" contract. Charge accrues during this period, but if you satisfy each of the conditions below, you will pay only the Cash Price, less any downpayment.

This is a _____ days "No Finance Charge" contract. Charge accrues during this period, but if you satisfy each of the conditions below, you will pay no Finance Charge.

Conditions: You must make all required payments as scheduled (refer to the "When Payments Are Due" box). You must pay the contract in full within the number of days shown above.

ANNUAL PERCENTAGE RATE The cost of your credit as a yearly rate.	FINANCE CHARGE The dollar amount the credit will cost you.	Amount Financed The amount of credit provided to you, or on your behalf.	Total of Payments The amount you will have paid after you have made all payments as scheduled.	Total Sale Price The total cost of your purchase on credit, including your downpayment of \$_____.
Your payment schedule will be:				
Number of Payments	Amount of Payments	When Payments Are Due		
		MONTHLY, beginning one month (unless the first payment box is checked below) after the Date of this Contract and continuing on the same day of each following month until fully paid. (However, if our substantial performance under this contract occurs 10 or more days after the Date of this Contract, then the first payment is due one month (unless the first payment box is checked below) after that date and the remaining payments are due on the same day of each following month until fully paid. The date of substantial performance is estimated to be _____, but if this date turns out to be later, the first payment is due one month (three months if the first payment box is checked below) after the Date of this Contract.)		
		<input type="checkbox"/> The first payment is due THREE MONTHS after the Date of this Contract (or after the date of substantial performance if that date is indicated above). Other payments are due on the same day of each following month until fully paid.		

Security: You are giving us a security interest in the property being purchased.

Late Charges: If any part of a payment is more than 10 days late, we may charge a late charge equal to 5% of the full payment.

Prepayment: If you pay off early, you may be entitled to a refund of part of the finance charge.

* means an estimate

We agree to sell and you agree to purchase the property described above. You promise to pay us the Total of Payments shown above and to make payments according to the payment schedule shown above. The terms on the reverse side are also part of this contract. If you agree to the terms of this contract, please sign your name below. All parties signing this contract are equally responsible for paying it in full. SEE NOTICE OF PROPOSING INSURANCE ON THE REVERSE SIDE.

YOU, THE BUYER, MAY CANCEL THIS TRANSACTION AT ANY TIME PRIOR TO MIDNIGHT OF THE THIRD BUSINESS DAY AFTER THE DATE OF THIS TRANSACTION. SEE THE ATTACHED NOTICE OF CANCELLATION FORM FOR AN EXPLANATION OF THIS RIGHT.

YOU ACKNOWLEDGE THE EXISTENCE OF THE ARBITRATION AGREEMENT SET FORTH ON THE REVERSE SIDE, AND YOU SPECIFICALLY AGREE TO BE BOUND BY ITS TERMS.

(To detach, tear along perforation)

NOTICE OF CANCELLATION

STATE OF FLORIDA UNIFORM COMMERCIAL CODE FINANCING STATEMENT FORM

A. NAME & DAYTIME PHONE NUMBER OF CONTACT PERSON

F. SEND ACKNOWLEDGEMENT TO:

Name _____

Address _____

Address _____

City/State/Zip _____

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY.

1. DEBTOR'S EXACT FULL LEGAL NAME - INSERT ONLY ONE DEBTOR NAME (1a OR 1b) - Do Not Abbreviate or Combine Names

1.a ORGANIZATION'S NAME

1.b INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

1.c MAILING ADDRESS Line One This space not available.

MAILING ADDRESS Line Two CITY STATE POSTAL CODE COUNTRY

1.d TAX ID# REQUIRED ADD'L INFO RE ORGANIZATION DEBTOR 1.e TYPE OF ORGANIZATION 1.f JURISDICTION OF ORGANIZATION 1.g ORGANIZATIONAL ID# NONE

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - INSERT ONLY ONE DEBTOR NAME (2a OR 2b) - Do Not Abbreviate or Combine Names

2.a ORGANIZATION'S NAME

2.b INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

2.c MAILING ADDRESS Line One This space not available.

MAILING ADDRESS Line Two CITY STATE POSTAL CODE COUNTRY

2.d TAX ID# REQUIRED ADD'L INFO RE ORGANIZATION DEBTOR 2.e TYPE OF ORGANIZATION 2.f JURISDICTION OF ORGANIZATION 2.g ORGANIZATIONAL ID# NONE

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE OF ASSIGNOR/S) - INSERT ONLY ONE SECURED PARTY (3a OR 3b)

3.a ORGANIZATION'S NAME

3.b INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

3.c MAILING ADDRESS Line One This space not available.

MAILING ADDRESS Line Two CITY STATE POSTAL CODE COUNTRY

4. This FINANCING STATEMENT covers the following collateral:

5. ALTERNATE DESIGNATION (if applicable) LESSOR CONSIGNEE/CONSIGNOR BAILEY/BAILOER AGENT NON-UCC FILING SELLER/BUYER

6. Florida DOCUMENTARY STAMP TAX - YOU ARE REQUIRED TO CHECK EXACTLY ONE BOX

All documentary stamps due and payable or to become due and payable pursuant to s. 201.22 F.S., have been paid.

Florida Documentary Stamp Tax is not required.

7. OPTIONAL FILER REFERENCE DATA

STANDARD FORM - FORM UCC-1 (REV. 01/2009) Filing Office Code Approved by the Secretary of State, State of Florida

Salesability Inc.

Investment and Interest secured by

Corporation Promissory Note
And
Personal Guarantee

Interest Paid the 5th of Each Month

Salesability Inc.

PROMISSORY NOTE

\$ _____
AMOUNT

DATE

PINELLAS COUNTY, FL
CITY, STATE

For value received, the undersigned jointly and severally agrees and promises to pay to the order of:

NAME

The principle sum of _____ Dollars (\$ _____) with interest thereon at the Rate of Twelve percent (12%) per annum on the unpaid balance. Payments shall be interest only. The entire outstanding principal balance shall be paid per agreed upon terms, attached.

The indebtedness evidenced by this note may be prepaid in whole or in part at any time without penalty or premium.

If there is a default in the payment of any sums or interest or in the performance of any Agreements contained herein, at the option of the holder of the note, the principal sum then remaining unpaid with accrued interest shall immediately become due and payable without notice, time being of the essence of this contract, and the principal sum and accrued interest shall both bear interest at the highest rate allowable by law from the date of default until paid. All sums paid under this note shall be credited first to accrued interest and then to principal.

Each maker and endorser waives presentment, protest, notice of protest and notice of dishonor and agrees to pay reasonable attorneys' fees and expenses in the enforcement of this note prior to, or subsequent to judgment and in any and all trial and appellate tribunals, whether suit be brought or not if, after maturity of this note or default, counsel shall be employed to collect this note.

SALESABILITY, INC.

BY: _____
ITS: _____

Salesability Inc.

Salesability Inc.

14377 US Highway 19 North Suite 200
Clearwater, Florida 33764

Phone 727-531-8644
Fax 727-539-6912

Memorandum of Understanding

Principal Investment will earn 12% (Twelve Percent) Interest Annually.

Interest will be paid on the 5th of each month.

Investment will be secured with Corporation Promissory Note, Personal Guarantee, and UCC1.

Joseph H. Rayl

Date

Salesability Inc.

Salesability Inc.

14377 US Highway 19 North Suite 200
Clearwater, Florida 33764

Phone 727-531-8644
Fax 727-539-6912

Interest to be paid the 5th of each month.

<u>INVESTMENT</u>	<u>YEARLY INTEREST</u>	<u>MONTHLY PAYMENT</u>
\$50,000	\$6,000	\$500
\$100,000	\$12,000	\$1,000
\$500,000	\$60,000	\$5,000
\$1,000,000	\$120,000	\$10,000

Investor Interest Payable Regardless of Loan Status