



## New Business License Registration

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Service	New Registration
Company Name	ALRIYAAD MEDICAL CENTER
Class	D
License Type	General Trade License
Industry	Pharmaceutical and Other Store-Based Retailing
Type of Organization	Sole Proprietorship
Agency License Required	NO

## Ownership Details

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Name	Gender	Ownership %
MOHAMED SAID WARSAME	MALE	100%
Total ownership Percentage %		100%

## Contact Details

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Phone Number(s)	0907276956 / 0907276956
Email	
Address	GAROWE JIDKA SODONKA GAROWE NUGAAL

## Contact Person

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Full Name	MOHAMED SAID WARSAME		
Contact	0907276956 / 0907276956		
Gender	MALE		
Birth Date	01-Jan-1987	Place of Birth	galkacayo
Occupation	owner		