

## **Company Profile**

COMPANY NAME: Koca Metal Makina İnş. San. Tic. Ltd. Şti.								
ADDRESS: Küçük san	ayi Sitesi G	iiriş Kapısı l	Karşısı					
ZIP CODE:41400		CITY:Kocaeli		PROVINCE: Gebze				
PHONE +90 641 15 55	FAX +90 262 6	541 29 23	HOME-PAGE www.kocametalmakin	a.com	E-MAIL info@kocametalmakina.com			
CONTACT NAME	Mr. Musa Koca							
1. ACTIVITY SECTO	OR:							
☐ TEXTILE/FASHION ☐ PLASTIC/RUBBER ☐ WOOD/FORNITURE ☐ ENGINEERING ■ METAL WORKING ☐ OTHER (specify) Hydrolic industrial Hose								
			<u> </u>		<u></u>			
2. DESCRIPTION OF THE ACTIVITY AND PRODUCTS								
Machining, producing machine and parts. Steel molting								
Final consumer of	your proc	lucts						
Heavy Industry Machi	ne Produce	rs						
Main application of	the proc	luct:						
Cement Factories, Iron and Steel Factories.								

PROMOS/CCIAA MILANO Via Camperio, 1 - 20123 Milano (Italia) Tel. +39-02-85155214 ( r.a.), Fax +39-02-85155227/5864 E.mail <u>infopromos@mi.camcom.it</u> Internet <u>www.promos-milano.com</u> P. IVA 05121090962 C.F. 97425540156

3. COMPANY INFOR	MATIO	N:					
START OF ACTIVITY:	1995		WORKFORCE:				
TURNOVER (in Euro): 2008 2.000.000 € 2009 1.500.000 €			EXPORT TURNOVER (%):				
4.COMMERCIAL PRO	OFILE						
Main factor of competitiveness of your company:							
☐ Design ☐ Quality ☐ Technology ☐ other (specify)		■ Price / q □ Marka a □ Range c	dı / Sunum				
Your presence in fore	ign mar	ket:					
□Direct □ Representant □ License □ Joint venture		☐ Franchising ☐ Main Distribution ■ Importer / Distributor ☐ Other (specify)					
Commercial reference	es:						
5. MARKET INFORM	ATION						
Previous experience in the local market:							

Is your company in contact w	vith local companies?	■ Yes	□ No					
<b>Do you want contact some specific company?</b> ☐ Yes ■ No If yes specify the name and the address of the company:								
Are there any company you don't want to contact? □ Yes ■ No If yes, do you want contact some specific company? Specify the name and the address of the company:								
6. PARTNER RESEARCH								
Tipe of partner you are looking for:								
■ Direct customers  □ Representant □ License □ Joint venture	☐ Franchising ☐ Main Distribution ☐Importer/Distributor ☐ Other (specify)							
Description of the partner you want to contact in the country and meeting expectations:								
Developing our work with the fo	oreign companies. Meeting with	the new cus	tomers.					

## **7.PERSON IN CHARGE OF THE MISSION**

Name of the person will take part to the mission: Levent Koca

Foreign languages spoken and written by the participant: