State of Arizona Department of Liquor Licenses and Control

Created 03/12/2024 @ 11:39:39 AM

Local Governing Body Report

LICENSE

Number:	06020041	Type:	006 BAR
Name:	EL SUSHI DE PAPA EXPRES	SS	
State:	Pending		
Issue Date:		Expiration Date:	06/30/2024
Original Issue Date:	07/01/1976		
Location:	524 E 8TH STREET		
	DOUGLAS, AZ 85607		
	USA		
Mailing Address:	524 E 8TH STREET		
	DOUGLAS, AZ 85607		
	USA		
Phone:	(520)364-6105		
Alt. Phone:			
Email:	@GMAI	L.COM	

Currently, this license has pending applications.

AGENT				
Name:	ANNA VALERIA PEREZ RIOS			
Gender:				
Correspondence Address:				
	DOUGLAS, AZ 85607			
	USA			
Phone:				
Alt. Phone:				
Email:	@GMAIL.COM			
Γ				
	OWNER			
Name:	OWNER ANNA VALERIA PEREZ RIOS			
Name: Gender:				
	ANNA VALERIA PEREZ RIOS			
Gender:	ANNA VALERIA PEREZ RIOS 524 E 8TH STREET DOUGLAS, AZ 85607			
Gender: Correspondence Address:	ANNA VALERIA PEREZ RIOS			
Gender:	ANNA VALERIA PEREZ RIOS 524 E 8TH STREET DOUGLAS, AZ 85607			
Gender: Correspondence Address:	ANNA VALERIA PEREZ RIOS 524 E 8TH STREET DOUGLAS, AZ 85607			

APPLICATION INFORMATION

279875 Application Number: Application Type: Created Date:

Location Transfer 01/31/2024

QUESTIONS & ANSWERS

006 Bar

- Are you applying for an Interim Permit (INP)? 1) No
- Does the Business location address have a street address for a City or Town but is actually in the 4) boundaries of another City, Town or Tribal Reservation? No
- 10) Provide name, address, and distance of nearest school. (If less than one (1) mile note footage) CENTER FOR ACADEMIC SUCESS 510 G AVE DOUGLAS, AZ 85607 1,056 FT
- Are you one of the following? Please indicate below. 11) Property Tenant Sub-tenant Property Owner **Property Purchaser** Property Management Company PROPERTY OWNER
- 12) Is there a penalty if lease is not fulfilled?

No

- 13) What is the total money borrowed for the business not including the lease? Please list lenders/people owed money for the business. ZERO
- 14) Is there a drive through window on the premises? No
- 15) If there is a patio please indicate contiguous or non-contiguous within 30 feet. NO PATIO
- Is your licensed premises now closed due to construction, renovation or redesign or rebuild? 16) Yes

If yes, what is your estimated completion date? 08/01/2024



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Arizona Department of Liquor Licenses and Control 800 W. Washington St. 5th Floor Phoenix, AZ 85007 (602) 542-5141

ATTENTION FINGERPRINT TECHNICIAN:

MENTOP

IZONA

Please follow the instructions below for fingerprinting this applicant.

- 1. Please fill out or ensure that the applicant has filled out all the required boxes on the fingerprint card prior to taking the fingerprints.
- 2. Request a valid, unexpired government-issued photo ID from the applicant and compare the physical descriptors on the applicant's photo ID to the applicant and to the information on the fingerprint card.
- 3. Fill out the information in the boxes below. Please print clearly.
- 4. Once the prints have been taken, place the fingerprint card and this form into the envelope and sealit. Please write your name or identification across the edge of the seal. Return the sealed envelope to the applicant.
 Do not give the applicant the fingerprint card without first sealing it inside the envelope.
- 5. Write applicants name on front of sealed envelope.

PRINT the following information:

Date	Name of Applicant:				
01/29/2024	ANNA VALERZA PEREZ.RZO				
Name of Fingerpri	nt Technician:				
G. SAMANIC	* 501				
Fingerprint technic	ian's Signature:				
Mater Auno 901					
Fingerprint technic	cian's Agency/company Name: Phone Number:				
Douceas p	OLZLE DEPARTMENT (520) 314-2677				
Type of Photo ID Provided (check one):					
Driver's Licen	se 🛛 Passport 🗍 Other (Please specify)				

	USE ONLY
	cccepted: 03/12/2024
CSR:	SG

LC:		
Amour	nt:	



AGENT/CONTROLLING PERSON QUESTIONNAIRE

Arizona Dept. of Liquor Licenses and Control 800 W. Washington St. 5th Floor Phoenix, AZ 85007 (602) 542-5141

Type or Print with <u>Black</u> Ink

DLLC USE ONLY Job #: 279875 Date Accepted: 03/12/2024 CSR: SG

License Number:06020041

<u>ATTENTION APPLICANT</u>: This is a legally binding document. An investigation of your background will be conducted. Incomplete applications will not be accepted. False or misleading answers may result in the denial or revocation of a license or permit and could result in criminal prosecution.

<u>Attention local governments</u>: Social security and birth date information is confidential. This information will be given to law enforcement agencies for background checks only.

QUESTIONNAIRE IS TO BE COMPLETED ACCORDINGLY AND SUBMITTED TO THE DEPARTMENT WITH A <u>BLUE OR BLACK LINED</u> FINGERPRINT CARD AND \$22 FEE. FINGERPRINTS MUST BE DONE BY A LAW ENFORCEMENT AGENCY OR BONA FIDE FINGERPRINT SERVICE.

1. Check the Appropriate Box			gent		2	Controlli	ng Person	
2.Name: perez	rios	An	na	Valer	DIL	n Date:		
3. Social Security #:		First Drivers L	icense #:	Middl	e		ed: arizon	-
4. Place of birth: Tu	cson Az.	Pim		ght:	Weight:	Eyes:	Hair:	
5. Name of current/me	ost recent spouse: _	Last		First	Middle	Birth Date	e:/ NOT a publi	_/ c record)
6. Are you a bonafide	resident of Arizona?	Yes 🖌 No	lf yes, w	hat is your do	ate of residen	CÀš		
7. Daytime telephone				address:		@g	mail.com	n
8. Premises Name:	L SUSHI D	PE PA	PA		Busine	ss Phone:	520 ,364	6105
9. Premises Address:	520 E 8Th S	Т	Dou	iglas	Az coo	chise	85607	
7, Hornisos Addiess.	Street (do not use	PO Box)		Clty	S	tate	County	Zlp

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No

10. List your employment or type of business during the past five (5) years, if unemployed, retired, or student, list place of residence address. (ATTACH ADDITIONAL SHEET IF NECESSARY)

FROM Month/Year	TO Month/Year	DESCRIBE POSITION OR BUSINESS	EMPLOYERS NAME OR NAME OF BUSINESS (Street Address, City, State & Zip)
°5 / 2017	CURRENT	MANAGER	EL SUSHI DE PAPA
/			526 E. 84h St Daugas, 1285607

11. Provide your residence address information for the last five (5) years A.R.S. §4-202(D) (ATTACH ADDITIONAL SHEET IF NECESSARY)

FROM Month/Year	To Month/Year	Street	City	State	Zip
07/ 2015	CURRENT		1383 20TH E 20TH ST DOUG	LAS aRIZONA 85607	

(ATTACH ADDITIONAL SHEET IF NECESSARY)

12.	As an Agent or Controlling Person, will you be managing the day to day operation of the licensed premises? If you answered YES, then answer #13 below. If NO, skip to #14	Yes	~	No	
13.	Have you attended a DLLC approved Basic and Management Liquor Law Training Course within the past 3 years? MUST attach copies of both training certificates.	Yes		No	4
14.	Have you been <u>cited, arrested, indicted, convicted, or summoned</u> into court for violation of <u>ANY</u> criminal law or ordinance, regardless of the disposition, even if dismissed or expunged, within the past five (5) years?	Yes		No	~
15.	Are there <u>ANY</u> administrative law citations, compliance actions or consents, criminal arrests, indictments or summons pending against you? (Do not include civil traffic tickets) <i>A.R.S.§4-202,4-210</i>	Yes		No	V
16.	Has anyone <u>EVER</u> obtained a judgement against you the subject of which involved <u>fraud or misrepresentation</u> ?	Yes		No	~
17.	Have you had a liquor application or license rejected, denied, revoked or suspended in or outside of Arizona within the last five years? A.R.S.§4-202(D)	Yes		No	V

18. Has an entity in which you are or have been a controlling person had an application Yes or license rejected, denied, revoked, or suspended in or outside of Arizona within the last five years? A.R.S.§4-202(D)

If you answered "<u>YES</u>" to any Question 14 through 18 <u>YOU MUST</u> attach a <u>signed statement</u>. <u>Give complete details</u> including dates, agencies involved and dispositions. CHANGES TO QUESTIONS 14-18 MAY NOT BE ACCEPTED

I, (Print Full Name)	_hereby swear under penalty of perjury and in compliance
with A.R.S. § 4-210(A)(2) and (3) that I have read and	I understand the foregoing and verify that the information and
statements that I have made herein are true and cor	rect to the best of my knowledge.
signature: Anna V. Pelcz	Date: 03/04/2024



ALIEN STATUS

Arizona Dept. of Liquor Licenses and Control 800 W. Washington St. 5th Floor Phoenix, AZ 85007 (602) 542-5141

Type or Print with Black Ink

Title IV of the federal Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (the "Act"), 8 U.S.C. § 1621, provides that, with certain exceptions, only United States citizens, United States non-citizen nationals, nonexempt "aualified aliens" (and sometimes only particular categories of aualified aliens), nonimmigrant, and certain aliens paroled into the United States are eligible to receive state, or local public benefits. With certain exceptions, a professional license and commercial license issued by a State agency is a State public benefit.

Arizona Revised Statutes § 41-1080 requires, in general, that a person applying for a license must submit documentation to the license agency that satisfactorily demonstrates the applicant's presence in the United States is authorized under federal law.

Directions: All applicants must complete Sections I, II, and IV. Applicants who are not U.S. citizens or nationals must also complete Section III.

Submit this completed form and a copy of one or more document(s) from the attached "Evidence of U.S. Citizenship, U.S. National Status, or Alien Status" with your application for license or renewal. If the document you submit does not contain a photograph, you must also provide a government issued document that contains your photograph. You must submit supporting legal documentation (i.e. marriage certificate) if the name on your evidence is not the same as your current legal name.

SECTION I - APPLICANT INFORMATION

APPLICANT NAME (Print ortype) ANNA VALERIA PEREZ RIOS

SECTION II – CITIZENSHIP OR NATIONAL STATUS DECLARATION

Are you a citizen or national of the United States? 🗹 Yes 🔲 No - If **yes**, indicate place of birth:

	TΓ	JC	C	\frown	NL
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_____State

COUNTRY _____UNITED STATES

If you answered **Yes**, **1**) Attach a legible copy of a document from the list below.

BIRTH CERTIFICATE 2) Name of document:

If you answered No, you must complete Sections III.

EVIDENCE OF U.S. CITIZENSHIP, U.S. NATIONAL STATUS, OR ALIEN STATUS

You must submit supporting legal documentation (i.e. marriage certificate) if the name on your evidence is not the same as your current legal name.

Evidence showing authorized presence in the United State includes the following:

- 1. An Arizona driver license issued after 1996 or an Arizona non-operating identification card.
- 2. A driver license issued by a state that verifies lawful presence in the United States.
- A birth certificate or delayed birth certificate showing birth in one of the 50 states, the District of Columbia, Puerto Rico (on or after Jan. 13, 1941), Guam, the U.S. Virgin Islands (on or after January 17, 1917), American Samoa, or the Northern Mariana Islands (on or after November 4, 1986, Northern Mariana Islands local time)
- 4. A United States certificate of birth abroad.
- 5. A United States passport. ***Passport must be signed ***
- 6. A foreign passport with a United States visa.
- 7. An I-94 form with a photograph.
- 8. A United States citizenship and immigration services employment authorization document or refugee travel document.
- 9. A United States certificate of naturalization.
- 10. A United States certificate of citizenship.
- 11. A tribal certificate of Indian blood.
- 12. A tribal or bureau of Indian affairs affidavit of birth.
- 13. Any other license that is issued by the federal government, any other state government, an agency of this state or a political subdivision of this state that requires proof of citizenship or lawful alien status before issuing the license.

SECTION III -- QUALIFIED ALIEN DECLARATION

Applicants who are not citizens or nationals of the United States. Please indicate alien status by checking the appropriate box. Attach a legible copy of a document from the attached list or other document as evidence of your status.

Name of document provided

Qualified Alien Status (8 U.S.C.§§ 1621(a)(1),-1641(b) and (c))

- 1. An alien lawfully admitted for permanent residence under the Immigration and Nationality Act (INA)
- 2. An alien who is granted asylum under Section 208 of the INA.
- 3. A refugee admitted to the United States under Section 207 of the INA.
- 4 An alien paroled into the United States for <u>at least one year</u> under Section 212(d)(5) of the INA.
- 5. An alien whose deportation is being withheld under Section 243(h) of the INA.
- 6. An alien granted conditional entry under Section 203(a)(7) of the INA as in effect prior to April 1, 1980.
- . An alien who is a Cuban/Haitian entrant.
- 8. An alien who has, or whose child or child's parent is a "battered alien" or an alien subject to extreme

cruelty in the United States

Nonimmigrant Status (8 U.S.C. § 1621(a)(2))

9. A nonimmigrant under the Immigration and Nationality Act [8 U.S.C § 1101 et seq.] Non-immigrants are persons who have temporary status for a specific purpose. See 8 U.S.C § 1101 (a) (15).

Alien Paroled into the United States for Less Than One Year (8 U.S.C. § 1621(a)(3))

10. An alien paroled into the United States for less than one year under Section 212(d) (5) of the INA

Other Persons (8 U.S.C § 1621(c)(2)(A) and (C)

- 11. A nonimmigrant whose visa for entry is related to employment in the United States, or
- 12. A citizen of a freely associated state, if section 141 of the applicable compact of free association approved in Public Law 99-239 or 99-658 (or a successor provision) is in effect [Freely Associated States include the Republic of the Marshall Islands, Republic of Palau and the Federate States of Micronesia, 48 U.S.C. § 1901 etseq.];
- 13. A foreign national not physically present in the United States.

14. Otherwise Lawfully Present

15. A person not described in categories 1-13 who is otherwise lawfully present in the United States.

PLEASE NOTE: The federal Personal Responsibility and Work Opportunity Reconciliation Act may make persons who fall into this category ineligible for licensure. See 8 U.S.C. §

ANNA VALERIA PEREZ RIOS	-tring)	L	etal	Kio5	03/04/2024
Print Name	Signature			Date	