### BOARD OF LIQUOR LICENSE COMMISSIONERS FOR BALTIMORE CITY DOCKET – THURSDAY, SEPTEMBER 24, 2015 –1:00 PM ROOM 215 - CITY HALL - 100 NORTH HOLLIDAY STREET

**Please note:** If you are interested in a particular case, please call (410) 396-4377 the day before these hearings to verify that a particular case is still scheduled for this date.

### 1:00 p.m.

- I. Expedited Items (Transfers):
  - Shaminder Kaur & Pinakin Patel, 5418-20 Harford Road, LLC T/a Hamilton Liquors, 5418-20 Harford Road - Class "A" Beer, Wine & Liquor License -Application to transfer ownership
  - 2. Keum Nan Kim, 1609 Laurens Street, LLC T/a Club Bar, 1609 Laurens Street Class "A" Beer, Wine & Liquor License Application to change a Class "BD7" BWL license to a Class "A" BWL license
  - 3. Orla Kane & Zaynep Tasoemir, 336 Charles, LLC T/a HomeSlyce, 336 N. Charles Street Class "B" Beer, Wine & Liquor License Application to transfer ownership
  - **4. Jacqueline Beal, BSq. Wine Co. T/a Grand Cru, 5911 York Road -** Class "BD7" Beer, Wine & Liquor License Application to transfer ownership
  - 5. Arjinder Singh & Michael Bradley, A & J Tavern, Inc. T/a J & J Bar & Liquor, 1801 Ramsey Street Class "BD7" Beer, Wine & Liquor License Application to transfer ownership
  - 6. Sam Chang & Ashley Rodriguez, Sambar Baltimore, LLC T/a Trade name pending, 101 W. Fayette Street Class "BHM" (Hotel-Motel) Beer, Wine & Liquor License Application to transfer ownership
- II. Regular Docket (New applications and hardship extension):
  - Vincent Tolson & Joseph Arizzi, Desire, LLC T/a Desire, 3821-23 Pulaski Highway – Class "BD7" Beer, Wine & Liquor License/Adult Entertainment – Application to transfer ownership
  - 2. **Binod Uprety & Gopal Bishwakarma, Maya, Inc. T/a Namaste Baltimore, 413 W. Coldspring Lane** Class "B" Beer, Wine & Liquor License Application for a new Class "B" Beer, Wine & Liquor restaurant license under the provisions of Rule 2.08 requiring \$200,000 in capital investment in restaurant fixtures and facilities and seating capacity for a minimum of 75 people, request for outdoor table service, and off-premises catering

### **Transfer of Ownership**

Applicant: Shaminder Kaur & Pinakin Patel,

5418-20 Harford Road, LLC T/a Hamilton Liquors

5418-20 Harford Road

Class "A" Beer, Wine & Liquor License

Application to transfer ownership

### **Board's Information:**

Attached is a copy of the application, interview form and map.

Community Letter(s)/ Memorandum of Understanding: None as of file date

Last Inspection Date: September 3, 2015 posting date

SDAT: Information Not Found - Email sent to applicant

### **BOARD'S DECISION**

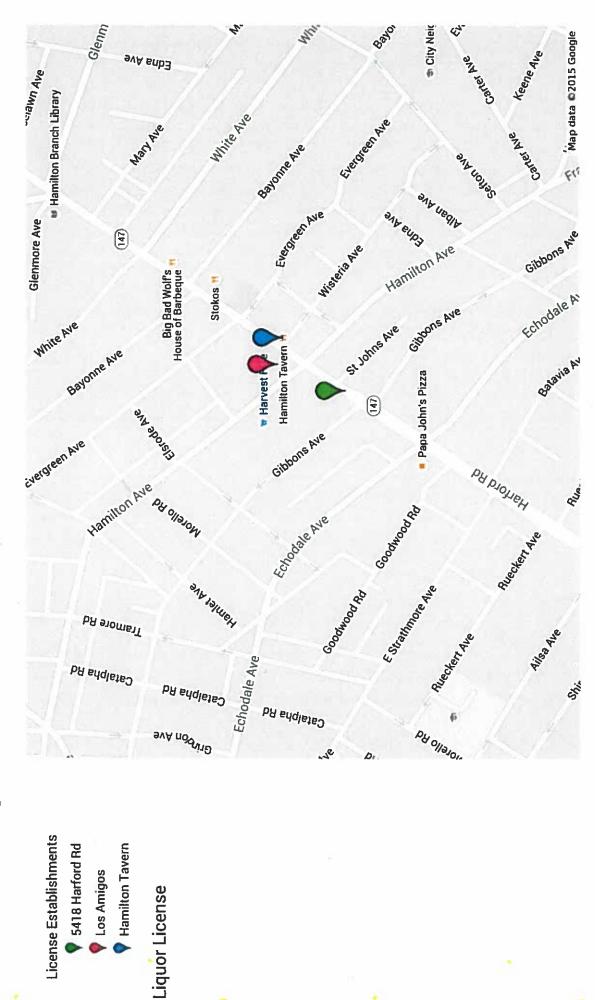
Maryland Department of Assessments and Taxation Business Services (w4)

Search Help

There are no records that match your criteria for Name: 5418-20 Harford Road.

Charter Search Results for: 5418-20 HARFORD ROAD

# Hamilton Liquors, 5418-20 Harford Road





### STATE OF MARYLAND BOARD OF LIQUOR LICENCE COMMISSIONERS FOR BALTIMORE CITY

231 E. BALTIMORE STREET, 6TH FLOOR BALTIMORE, MARYLAND 21202-3258 (410) 396-4377 FAX (410) 396-4382

Zonnig District	400
	Zonnig District

<b>%</b>	(410) 396-4377 FAX (410) 396-4382	ZONING DIVISION
<b>"</b>	Alcoholic Beverage License Application	Department of Housing and Community Development
Аp	pplication for a Class L A License at the location 5418-20 H	arford Road
Ca	orporate/LLC name 5418-20 Harford Rand, Trade name Hami	Hon Liques
At	torney for Applicant (s) Me. Kodluski Address: 19 E. Faye He St.	Phone: 4/0 685-5
То		0 21202
	Applicant(s)	
(A)	Name: Shakik Dea Kauk	<u></u>
	Address: 101 MARINE OAKS SORFSEY MSZipcode: Z	1221
	Home phone number 4/3-707-8886 Date of birth 11/08/ 1990	Sex F
	Place of birth How long at current	
	Have you been a resident or taxpayer of Baltimore City for 2 years preceding the filing of this a City resident: Yes or Address of property on which tax is paid in your individual.	pplication?
	Have you ever been convicted of a felony? Yes No Been found guilty of violation of Yes No Been found guilty of violating gambling laws? Yes No Been found guthe laws of the United States? Yes No If yes, provide details:	rilty of any offense against
	What financial interest do you have in the business to be conducted under this license?	70
	Are you financially interested in any other alcoholic beverage business for which a license has issued? Yes No Do you have any indebtedness or other financial obligations to at distiller, or wholesaler at the time of making this application? Yes No Have you for the sale of alcoholic beverages? Yes No If yes, state when and where:	been applied, granted or
	Is there anyone else who has a financial interest in this license or the business to be conducted un	ider it? Yes No
	If granted a license, will you incur any indebtedness or financial obligation to any manufactor wholesaler other than for the purchase of alcoholic beverages? Yes No	urer, brewer, distiller or
	If granted a license, will you conform to all laws and regulations relating to the business in engage? Yos or No Do you consent to the Board of Liquor License Commissioners being furnitariest record, if any? Yes No	which you propose to ished with a copy of your
(B)	Name: PINAKIN J PATEL	
	Address: 21 S HIGHLAND AVE BALTO MD Zipcode: 21:	
	Home phone number 4113-472-1484 Date of birth 12-24-62	
	Place of birth How long at current	
	Have you been a resident or taxpayer of Baltimore City for 2 years preceding the filing of this are City resident: Yes No or Address of property on which tax is paid in your individual property on which tax is paid in your individual property or your prop	oplication?
	Have you ever been convicted of a felony? Yes No Been found guilty of violation of a Yes No Been found guilty of violating gambling laws? Yes No Been found guilty the laws of the United States? Yes No If yes, provide details:	alcoholic beverage laws? ilty of any offense against
	What financial interest do you have in the business to be conducted under this license?	170
	Are you financially interested in any other alcoholic beverage business for which a license has to issued? Yes No Do you have any indebtedness or other financial obligations to an distiller, or wholesaler at the time of making this application? Yes No Have your for the sale of alcoholic beverages? Yes No If yes, state when and where: On	y manufacturer, brewer, previously held a license
	Is there anyone else who has a financial interest in this license or the business to be conducted und	70 A A
	If granted a license, will you incur any indebtedness or financial obligation to any manufacture wholesaler other than for the purchase of alcoholic beverages? Yes No	
	If granted hicense, will you conform to all laws and regulations relating to the business in engage? Yes or No  Do you consent to the Board of Liquor License Commissioners being furnisariest record, if any? Yes No  No	which you propose to shed with a copy of your

Office use only Transfer of ouriesther

(C)	Name:		
	Address:		Zipcode:
	Home phone number	Date of birth	Sex
	Place of birth		How long at current address?
	Have you been a resident or taxpayer of Ba City resident: Yes No or Addi	ltimore City for 2 years precedings of property on which tax is	ng the filing of this application? paid in your individual name:
	Yes No Been found guilty of viola	iting gambling laws? Yes N	guilty of violation of alcoholic beverage laws?  Been found guilty of any offense against
	What financial interest do you have in the b	usiness to be conducted under	this license?
	issued? Yes No Do you have	e any indebtedness or other fing this application? Yes	which a license has been applied, granted or ancial obligations to any manufacturer, brewer, lo Have you previously held a license and where:
	Is there anyone else who has a financial into	rest in this license or the busine	ess to be conducted under it? YesNo
	If granted a license, will you incur any in wholesaler other than for the purchase of al	debtedness or financial obliga coholic beverages? Yes	tion to any manufacturer, brewer, distiller or No
	engage? Yes or No Do you consent to the arrest record, if any? Yes No	e Board of Liquor License Com	ing to the business in which you propose to missioners being furnished with a copy of your
2.	Address of the place to be licensed	7418-20 Har	
	Phone number 410 126 -		of the building in which the business will be
	conducted St FLOOV	to busine	1//-
	Will you provide live entertainment?		kind?
	Outdoor table service?		od and alcohol?/\/{\( \sigma \)}
	Will you offer delivery of food and/or alc		l property in which the business is to be
443-989	operated 35WINDO Sing	a 607/ Truckatte	1 200 FILLWIDE MADINT
asse of 1, insp busi 1 km each each all o and	I submit herewith a statement duly executed a maing to the granting of the license applied for, auti- iquor License Commissioners of Baltimore City, ect and search without warrant, the premises upon a mess is to be conducted, at any and all hours. I also ow to be owners of real estate and registered voters a and the real estate situated in the city where the but has been acquainted with the applicant; and certif of the statements contained herein are true, that they	and acknowledged by the owner of a horizing the Comptroller, the duly a its duly authorized agents and em which the business is to be conducte submit herewith, and as a part herec so of the city in which the business is stiness is to be conducted of which a lying that they have examined this a are of the opinion that the apolican	the premises in which the business is to be conducted, authorized deputies, inspectors and clerks, the Board ployees and any peace officer of Baltimore City, to d., and any and all parts of the building in which said of, a certificate signed by at least three citizens whom a to be conducted, containing the voting residence of each is the owner, and setting forth the length of time application, that they have good reason to believe that is a suitable person to obtain the license applied for, addicted and believe them suitable for the conduct of
THE THE PARTY OF T	iain hin fajse statemen, the offender shall be dec	i, report, uffidavit or oath, require emed guilty of perjury, and upon o	ed under any of the provisions of this Article shall conviction thereof, shall be subject to the penalties
13:	ARY OF ARY	+ Shaming	der kaur
E I		* 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	<b>?</b>
H :	FUBL OF S	7	
眉的	NOVEMBER	··	Applicant
B	MORE	AFFIDAVIT	
CTA	ATE OF MARYLAND CO.	/-	<b>^</b>
317	ATE OF MARYLAND, City of Baltimore, THIS CERTIFIES, That on the	AM day of	August 20 15.
	Shaming Kayr  applicant named in the foregoing application	and Pinaki	of the State of Maryland, personally appeared  The Parel  Take that the statements therein are true to the
best	of his knowledge and belief.		and the same transfer and the to the
	WITNESS my hand and official seal.	gla :	Dad :
	(SEAL)	_ June	

### (Statement of owner of premises required by the Alcoholic Beverages Law of Maryland)

amed in the application made by.	#
o the Board of Liquor License Commissioners of Ba	ditimore City, under the Alcoholic Beverages Law of Maryland, for a
uthorize the State Comptroller, his duly authorized	nt to the granting of the license applied for, and that $\frac{1}{We}$ hereby deputies, inspectors and clerks, the Board of Liquor License Comagents and employees and any peace officer of Baltimore Gity to spon which the business is to be conducted, and any and all parts of at any and all hours.
VITNESS my hand(s) and seal(s) this	JASWINDER SINGH
ddress	6071 DUCKETTSLN.  Name Address, and Plane Mander of Property Owner  ELKRIDGE, MD 2107.
	443-986-1474

We, the undersigned reputable citizens, certify:

- That we are the owners of real estate situated in the City of Baltimore.
   That we are registered voters in the City of Baltimore.
- (3) That we have been acquainted with the applicant for a period of more than two years.
- (4) That we have examined the application and have good reason to believe that all of the statements contained therein are true.
- (5) That we are of the opinion that the applicant is a suitable person to obtain the license for which application is made.
- (6) That the applicant herein has been a taxpayer or resident of the City of Baltimore for more than two years, and a resident of the State of Maryland for two years and a registered voter of the State.

Name	Address ,	Length of time acquainted
	Voting Residence	with applicant
Michael Bradley	Property Owned	
61 0 16	Voting Residence 517 N. Cary 57	, , , ,
William Dickerson	Property Owned 517 N. CARRY ST.	Zyrsi
	Voting Residence 4105 word haven see	
Quellan Vikus	Property Owned 4105 availance are	3 / r-Si
James E. Golden St.	Voting Residence 37 S Kossuth 27	
James E. Colden Sr.	Property Owned 37 S Kossuth ST	Zyrs.
Rayl A Jefferson	Voting Residence 119. N. Edguard 17	<del></del>
Day a. Jefferson	Property Owned 119 N. Edgewood ST	2- V LZ
(The names and addresses of	the signers must be printed or typeweitter above at the	1

(Statement of owner of p	remises required by the Alcoholic Beverages Law of Maryland)	
	ner(s) of property known as 5418-20 Hay to	nd Rd
	Daminder Kaux and Dis Vi	-1-2
named in the application made by	ers of Baltimore City, under the Alcoholic Beverages Law of M	aryland, for a
License expiring April 30, 20	$_{ m We}^{ m I}$ assent to the granting of the license applied for, and that	. I
missioners of Baltimore City, its duly au	authorized deputies, inspectors and clerks, the Board of Liquor tithorized agents and employees and any peace officer of Balti remises upon which the business is to be conducted and any on	License Com-
Witness my hand(s) and seal(s) this	14th day of august	
WITNESS: Clame Raya	JASWINDER SIME	7200
Address 9 E. Fayotta &	Name. Address, and Phone Number of Property Chance  El Kridge, MD	2007
Ste. 460		21075
21202 RE	AD CAREFULLY	0 1419
(The following certific	cate must be signed by at least THREE CITIZENS.)	
We, the undersigned reputable cit		
<ul><li>(1) That we are the owners of re</li><li>(2) That we are registered votes</li></ul>	eal estate situated in the City of Baltimore. rs in the City of Baltimore	
(3) That we have been acquainte	ed with the applicant for a period of more than two years.	
(4) That we have examined the contained therein are true.	application and have good reason to believe that all of the	statements
(5) That we are of the opinion t application is made.	hat the applicant is a suitable person to obtain the licens	e for which
(6) That the applicant herein ha	is been a taxpayer or resident of the City of Baltimore for f Maryland for two years and a registered voter of the St	r more than ate.
Name	Address	Length
print name Name	F4	of time acquainted with
Sian.	Voting Residence	applicant
print:	Joting Residence	<del></del>
Slan	Property Owned	
bring.	oting Residence.	
Sign , =	Property Owned	<u> </u>
•	oting Residence	
. //	Property Owned	<u> </u>
cian	oting Residence	_
CTI-	roperty Owned.	

### FOR CLUBS, CORPORATIONS, PARTNERSHIPS AND ASSOCIATIONS

Name of Corporation, Partnership, Club or Association 54/8-20 Harford Road, CCC
Trade Name Hamilton Liquors
Address 5418-20 Harford Road
Names of all officers or partners:
Shaminder Kaur- Member
Pinakin J. Patel - Sec
Names and addresses of all Stockholders  Percentage of Stock Ownership
Shaminder Kaur- 99%
101 Marine Daks, Essex, MD 21221
20 NATION 1899 VIII 1899 V
Pinakin J. Patel 1%
21 S. Highland Ave Shaminder Kaur
21224 President or Vice-President
NOTE:—If application is made on behalf of a corporation or a Limited Liability Company at least one of the individuals applying must be a resident or taxpayer of the City of Baltimore for two years next preceding the filing of this application, will continue to be a resident or taxpayer of the City of Baltimore, and has been a resident of the state of Maryland for two years and a registered voter of the State.
Give name, voting residence and property upon which tax if any is paid of at least one of the individuals so applying.  NAME  NAME
voting ADDRESS 21 S. Highland Ave
PROPERTY ON WHICH TAX IS PAID 215. Highland Ave
IF THIS APPLICATION IS FOR A TRANSFER FROM ANOTHER LICENSEE(S), please have that licensee(s) sign below to indicate his or their consent to the transfer and have their signatures witnessed.
WITNESS: CO
une 17/8 2 Farge
1

1210-49-3 REV 1/12

	LICANTS' INTERVIEW FORM	$\circ$ 1
ADDRESS OF LICENSED PREMISES	. 5918-20 Harford	Rd.
1. Corporate Name (if any):_	1820 Harford, L	<u> </u>
2. Biographical background of	, ,	
(a) Name: Shaminder	Kaur D.O.B. 11/08/	90 Marital Status
Address: 101 Marine Da	Ks Dr. Essex Home p	hone: <u>443-707-8884</u>
Employment History for past	10 <b>years</b> (Please provide date	s for various employers):
American Newstand Caton House -	- East Point Mal/	2012-present
(b) Name: Pinakin J.	Patel D.O.B. 12-24-(	00 Marital Status
Address: 21 5. Highland	AVE 21224 Home p	hone: 443-472-148
Employment History for past 10	years (Please provide dates for	various employers):
19 Highland	Ave (grocery store	) 2005 - present
(c) Name:	D.O.B	Marital Status
Address:	Home	phone:
Employment History for past 10	years (Please provide dates fo	r various employers):
**************************************		
3. If married applicant's spouse is p place of birth, Social Security number, why the spouse is not going on the licens	home address, place of employment for	
. Spouse's Name DOB	Place of Employment	Reason not going on license
(a) NA	v 8	
(b) N/A		
(c)		

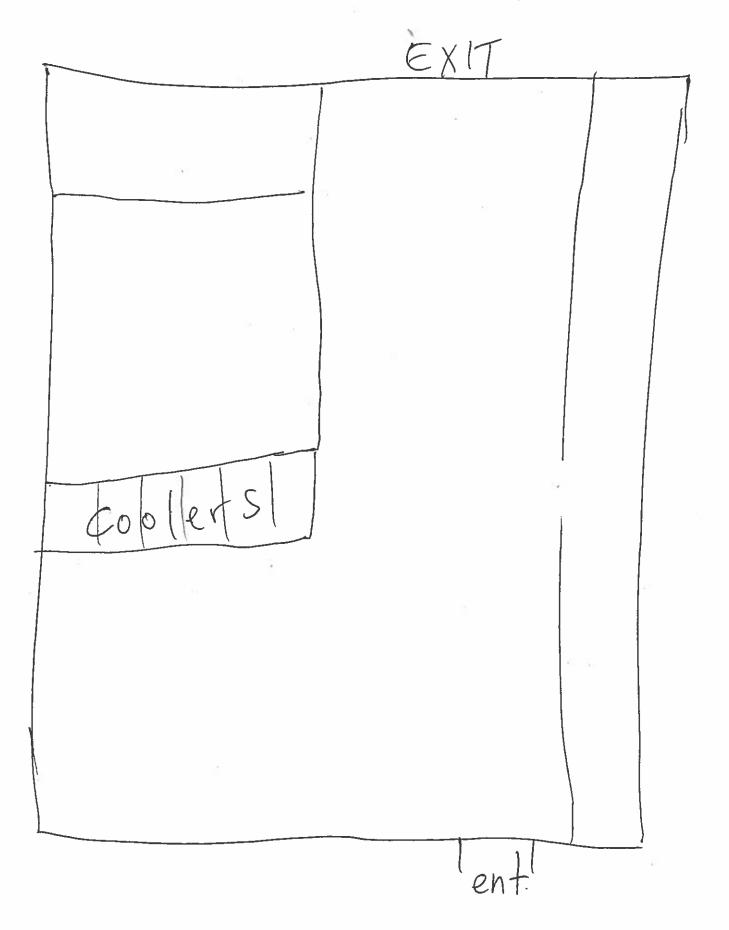
BOARD OF LIQUOR LICENSE COMMISSIONERS FOR BALTIMORE CITY

41. For stockholders or spouses who have a financial interest in the business but who are not applicants for the license, give name, address, date and place of birth, Social Security number, employment history for past 10 years, amount of investment and

	Address	DOB	Employment	\$ Investment	Source of funds
				Va.	
	14	15		180	
		82		Ti .	
		12		1	
			<del></del>		
			70 000 02	`	
. Purchase p	rice of busin	ess:	<u>70,00</u> 0,.00	) 	payment <u>2,000</u>
Terms for	balance due_	at	settlement	- N	
Payee '/	11500K En	terpri.	ses, Inc		-
Owner of r	eal property			P	hone #:
Rental fee	and terms of	lease			
Cost of re	al property_	225	000 . Ju	Down	payment /0,000.
Terms for	balance due		at settleme	ent	
Payee	Yeong Yu,	UC			
	1 9 1 '		or	27	_
Cost of bu	siness and p	roperty_		Down	payment
	siness and pr			Down	payment
Terms for Payee	balance due_				
Terms for Payee  . Source of further business.  nstitution from the present the present the present the present the present that the present the prese	nds: (a) Indica (b) If funds to m whom funds a ly on deposit, onal income tax personal saving	te the so purchas re being indicate records : s, indica ds to be	urce of funds being the business are obtained. (c) If yearly earning from ay be requested by the approximate ball presented to the E	g used by each age a gift or loa the funds to pu m applicant's play the Board to ve ance of all bank to ard upon reques	pplicant to purchant, identify personant acceptance of employment rify income.) (d)
Terms for Payee  . Source of further business.  nstitution from the present the source of the present the source of the present the presen	nds: (a) Indica (b) If funds to m whom funds a ly on deposit, onal income tax personal saving	te the so purchas re being indicate records : s, indica ds to be	urce of funds bein e the business ar obtained. (c) If yearly earning fro may be requested by	g used by each age a gift or loa the funds to pu m applicant's play the Board to ve ance of all bank to ard upon reques	oplicant to purcha n, identify perso rchase the busine ace of employment rify income.) (d) /investment accoun
Terms for Payee  . Source of further business.  nstitution from the present the present the present the present the present that the present the prese	nds: (a) Indica (b) If funds to m whom funds a ly on deposit, onal income tax personal saving	te the so purchas re being indicate records : s, indica ds to be	urce of funds being the business are obtained. (c) If yearly earning from ay be requested by the approximate ball presented to the E	g used by each age a gift or loa the funds to pu m applicant's play the Board to ve ance of all bank to ard upon reques	oplicant to purchan, identify personance the busines are of employment rify income.) (d)
Terms for Payee  Source of function from the present present usiness. (Persunds are from or past two years)	inds: (a) Indica (b) If funds to om whom funds a ly on deposit, onal income tax personal saving ears (such recor	te the so purchas re being indicate records : s, indica ds to be	urce of funds being the business are obtained. (c) If yearly earning from ay be requested by the approximate ball presented to the E	g used by each ape a gift or loa the funds to pum applicant's play the Board to ve ance of all bank toard upon reques	oplicant to purchan, identify personance the busines are of employment rify income.) (d)
Terms for Payee  . Source of further business.  matitution from the present usiness. (Persunds are from the present two yes)	inds: (a) Indica (b) If funds to om whom funds a ly on deposit, onal income tax personal saving ears (such recor	te the so purchas re being indicate records : s, indica ds to be	urce of funds being the business are obtained. (c) If yearly earning from any be requested by the approximate ball presented to the E	g used by each ape a gift or loa the funds to pum applicant's play the Board to ve ance of all bank toard upon reques	oplicant to purchan, identify person rchase the busine ace of employment rify income.) (d)
Terms for Payee  . Source of further business.  matitution from the present usiness. (Persunds are from the present two yes)	inds: (a) Indica (b) If funds to om whom funds a ly on deposit, onal income tax personal saving ears (such recor	te the so purchas re being indicate records : s, indica ds to be	urce of funds being the business are obtained. (c) If yearly earning from any be requested by the approximate ball presented to the E	g used by each ape a gift or loa the funds to pum applicant's play the Board to ve ance of all bank toard upon reques	oplicant to purchan, identify persorchase the busines are of employment rify income.) (d)

7. Indicate when applicants/busin	e other financial aness:	assistance may be derived if needed by
8. Who will be t	he full time opera	ator of the establishment?
If a manager is	to be hired, biogra	aphical information must be submitted:
		The second secon
		Marital Status
		lO years:
9. Describe the	licensed premises	: liquor Store
Marvland or in a	ing other etates T	coholic beverage license in the State of f so, where and when?
Name: Jham	inder Rayr	<u> </u>
Name: Tingki	J. Patel	- Yes on 5418-20 Harford Ro
Name:		
11. Is the licen If not, when	sed premises presented the establishment	ently open and operating?
12 Whom may we phone number	contact about position:ShamindM	ting the transfer notice? Name, address,  Kaur 443-707-8446
13. Inspector(s)	handling transfer	r:
Date of inte		

FLOOR PLAN OF LICENSED PREMISES



### Change of Class from BD7 to A

Applicant(s):

Keum Nan Kim

1609 Laurens Street, LLC T/a Club Bar

1609 Laurens Street

Class "A" Beer, Wine & Liquor License

Application to change a Class "BD7" BWL license to a Class "A" BWL license

### **Board's Information:**

Attached is a copy of the application, interview form and map.

Community Letter(s)/ Memorandum of Understanding: None as of file date

Last Inspection Date: September 3, 2015 posting date

SDAT: In Good Standing (Active)

### **BOARD'S DECISION:**

Maryland Department of Assessments and Taxation Business Services (w4)

Search Help

Entity Name: 1609 LAURENS STREET, LLC

Department ID: W14139919

General Information

Amendments

Personal Property

Certificate of Status

### Principal Office (Current):

UNIT 908 4732 DORSEY HALL DRIVE ELLICOTT CITY, MD 21042

### Resident Agent (Current):

ARI M. MOSSOVITZ, ESQUIRE SUITE 201 10075 RED RUN BLVD OWINGS MILLS, MD 21117

Status:

**ACTIVE** 

Good Standing:

Yes

What does it mean when a business is not in good standing or forfeited?

Business Code:

Other

**Date of Formation or Registration:** 

05/20/2011

State of Formation:

MD

Stock/Nonstock:

N/A

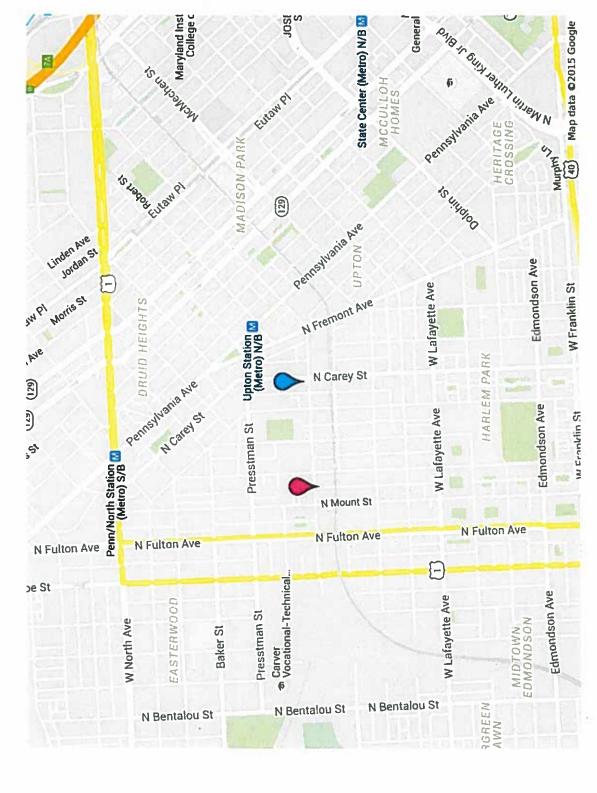
Close/Not Close:

Unknown

### 1609 Laurens Street - Club Bar

**Licensed Establishments** 

1609 Laurens St 1300 Laurens St Liquor License Map



### Roard of Liquor License Commissioners for Baltimore City

							2500 H
CLASS TYPE: A LIGENSE AT THE LOCAT	110N: 1609 L	Aurens S	5t. 21217 F	TRANSER, LOCAT	TON:		
CORPORATE/LLC/LEP/PARTNERSHIP NAME	1609 Lau	arens S	street, LLC	-TRADE NAME: _	Club	Bar	
ATTORNEY FOR THE APPLICANT: Jay		RESS: 3446		Ctr.phone: 4	10-465-2	60 EMAIL: Day	you law
INDICATE TYPE OF LICENSEAPPLICATION:  Describe Part of Premises to be Used: ( Will Live Entertainment be provided?		NEW - EX	•	Maria de la Carta de la Car	/ '		<u>yan</u> g ≩No
Will Outdoor Table Service Be Provided?	' □Yes 🔀 No	Off Premise I	Catering of Food	and Alcohol?	□ Yes 🔼 No		
Please note that as per Art. 2B §10-202( obtained zoning approval from the City of timeframe for obtaining letter of approva	a)(iv)(1) that an a <sub>l</sub> F Baltimore Do you	oplication for t have a Zoning	the issuance or t	ransfer is not d	complete unless	the applicant ha	
WORKER'S COMPENSATION INFORMATION -	INSURANCE GARRI	ER NO E	mplanes	POLICY OR BIND	ER #:		
1. Applicant A  Keum Non Kim  (fullgame)  3100 Wheaten Wa  (residence) Street  05/19/1949  (Month/Year of Birth)  If applicable, address of Property on which taxi  Check: Yes No Are you a regi  Z. Applicant B	410- (telephon Ay F. Z City Female (Sex: Male or Fen	458 - 1 eno.) Flicott State	City M Zip Rode South Birth)	(period of res	ayyo (c aal (Requir 43 sidency in Baltim	ed)  pare City)	_uda_sta
(full name)	(telephon	e na.)	30	E-n	nail (Requir	ed)	
(residence)Street	City	State	Zip Code	(period of re	sidency in Baltim	nore City)	
(Month/Year of Birth)	(Sex: Male or Fen	nale) (Place o	f Birth)	<u> </u>			
If applicable, address of Property on which tax i Check: Yes No Have you been Yes No Are you a regi	a resident and ta	xpayer of the	: City of Baltimo imore?	re for Z years	preceding this	application?	
3. Applicant C							
(full name)	(telephon	eno.)	<u> </u>	E-n	nail (Requir	ed)	
(residence)Street	City	State	Zip Code	(period of re	sidency in Baltim	nore City)	
(Month/Year of Birth)	(Sex: Male or Fer	nale) (Place o	f Birth)				
If applicable, address of Property on which tax							
Check:  Yes  No Have you been Yes  No Are you a regi	i a resident and ti istered voter in ti	expayer of the he City of Balt	: Lity of Baltimo timore?	re for 2 years	preceding this	application?	

I. Has the applicant(s) been convicted of a felony, or has been	Applicant A 🗆	B□	C
adjudged guilty of violating the laws governing the sale of any alcoholic beverage or for gambling in any State, including Maryland?   Yes   X No If yes, mark applicant and provide explanation in adjacent space provided.			
	Applicant A 🗆 🕝	B□	C
2. State whether the applicant(s) has ever been adjudged guilty of any offense against the laws of the State of Maryland or the United States.   Yes No If yes, mark applicant and explain.			
7 Une sta applicant (a) anne hald a lineana (ag tha gala at alashalia	Applicant A 🗆	В□	C
3. Has the applicant(s) ever held a license for the sale of alcoholic beverages in the State of Maryland? 权 Yes 口 No If yes, explain.	1609 Lau	rens	street
4. Has the applicant(s) ever had a liquor license suspended or revoked? ☐ Yes ☑ No If yes, explain in adjacent space.	Applicant A 🗆	В□	C
5. Does the applicant(s) have a pecuniary interest in any other alcoholic beverage business or business for which a license has been applied for, granted, and issued?   Yes X No If yes,	Applicant A 🗀	В□	C -
explain in adjacent space.			
6. Is your spouse or child a licensee, in this jurisdiction or any other, and does he or she have any financial interest in any other alcoholic beverage business?  Yes XI No If yes, explain.	Applicant A 🗆	B	
7. Is there now, or will there be, during the continuance of the license applied for, any other person financial interested in said license or business to be conducted thereunder? 口 Yes 文.No If yes, explain in the adjacent space provided.			
8. is the licensed premises presently open and operating?  ☑ Yes ☐ No If no, please provide information requested in adjacent space provided.	Closure Oate:		
9. Do any of the applicant(s) have any indebtedness or other financial obligations to any manufacturer, brewer, distiller, or wholesaler at the time of making this application?  Yes A No If Yes, please provide information as to the applicant(s) indebted, the amount of indebtedness, and the name of the manufacturer, brewer, distiller, or wholesaler in the adjacent space provided.	Explanation:		

urchase Price of Jusiness	Owner of the Real Property	Cost of the Real Property	Cost of the Business	Cost of the Personal	Down Payment provided to seller	Terms for the Balance due
H2111522	Fruperty	rruperty	DUSINESS	Property	hi avinca ta zenei	Odiones and
NA						
777						
ease list the followi Hame		e <mark>Manager of the estab</mark> Address	lishment to be licen:	sed: Phane	Additional Control	Email
(I) S			- 1			S COLUMN
N/A						
	Business Entities - (Gi list all authorized per:		ses – in Corporation l	st all officers (attach l	ist if necessary) or in Limiti	ed Liability
			1. onton we	4 2 ~ 10	+	arune dam de
IAME: <u>Peum</u>	Man Kim	Address: 3102 (	cott city, mi	/	₹%OF STOCK HELD RESID	JENUE: 100 /
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IAME:		_ADORESS:		TiTLE:	%OF STOCK HELD RESID	DENCE:
*****Attached i	is a list of the nam utstanding stock o		f all outstanding s	tackhalders who o	%0f STOCK HELD RESK the day of this applica partnership agreemen	ation awn mare
*******Attached i an 5% of the ou ganization.****** Extract from Law iall be deemed g	is a list of the namentstanding stock of the	es and addresses of the corporation	f all cutstanding s and the articles er the provisions	tockholders who or of incorporation, of this Act shall con	the day of this applica	ation own more t or articles of onts, the offender
*******Attached is an 5% of the ouganization.*****  Extract from Law in the bedeemed governme.  EXTIFICATE OF APPLICATE OF APPLICATE OF APPLICATE OF APPLICATE OF Licens of clerks, The Board of Licens of clerks, The Board	is a list of the name of the standing stock of the standing stock of the standing stock of the standing standing of the standing standing of the standing st	es and addresses of the corporation  oath required under  pplicant whose signate the filing of this applicant County laws and reg  Baltimore City, and he oners for Baltimore Ci any and all hours, with	f all outstanding s and the articles ar the provisions a and conviction the are appears below c ation. Each of said ap gulations relating to erby grants permiss ity, its duly authorize	tockholders who or of incorporation, of this Act shall con ertifies that he/she ha plicants hereby certifies the sale of alcoholic bront to the State Compt on to the State Compt d agents and employe	n the day of this applica partnership agreemen atain any false stateme	ation own more t or articles of  onts, the offender ad by Law for that  payer of Baltimore C  ase applied for is roles and regulatio deputies, inspectors of Baltimore City or  which said business
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(Witness my hand and seal)

James S. OH

Name and Address of the own	ers of the premise/landlord: Hee So	- Roh	_Phone Number: _	40-225-0113
STATEMENT OF	OWNER OF PREMISES REQUIRED IN CONNECTIO	IN WITH ALCOHOLIC BEVERAGES L	AW DFMARYLAND	l
application made to Board of the license applied for, and here Commissioners of Baltimore Cit	iquor License Commissioners of Baltimore City un by authorize the State Comptroller, his duly author y, its duly authorized agents and employees, and e premises upon which the business is to be cond	Zip Code at	which is name F Maryland and asser rks, the Board of Liq imore and State of M building in which sald	ed in the present at to the granting of uor License Maryland, to inspect
WITNESS: Hee	- Xon	Come	130	
	day of Aus.	ed Tans S.	2015	
and acknowledge the execution	Noh of the aforegoing statement to be 1200-	own i plustan		act.
(Witness my hand and seal) Nutary Public N Howa Ny Comn	Jay S. Yoo OTARY PUBLIC rd County, Maryland nission Expires 04/30/2011	- Jan	1-19	<b>-</b>
We, the undersigned citizen present application is to be	st be signed by at least <u>3</u> persors. ns, real estate owners and registered vote a conducted, certify that the qualifying app	licant(s) is/are personally kn	own to us and ha	ess covered by the s been a resident
or a taxpayer or paromore	City and a resident of the State of Maryla	nd for 2 years preceding this	application.	
Names Names	City and a resident of the State of Maryla  Address	nd for 2 years preceding this Signature	DOB	Length of time
			DOB	Length of time Acquainted with
			DOB (Month/Year)	Length of time Acquainted with
	3705 contection 2,24		DOB (Month/Year)	Length of time Acquainted with
	3705 Claster to 2,244 2414 Word brook Are	Signature	DOB (Month/Year)	Length of time Acquainted with
	Address 3705 Clarker 2,244 2414 Wood brook Are 21217 1600 Retrent 58	Signature	1/1964 7/1959	Length of time Acquainted with
	Address 3705 Clarker 2,244 2414 Wood brook Are 21217 1600 Retrent 58	Signature	1/1964 7/1959	Length of time Acquainted with
Ramond Lowe by Jakins Charlie Charg	Address  3705 Clarker 2,244  2414 Wood brook Are 21217  2019 Micryland Ave 2121	Signature  Signature	Month/Year)  //964  7/959  /6/196/  I o/25/59  Status of Approved: Yes	Length of time Acquainted with the Applicant(s)  30 yes  2 yes  15 yes  20 yes
Ramond Lowe by Jakins Charlie Charge	Address  3705 Contactor 2,244  2414 Wood brook Are 2121  FOR OFFICE U	Signature  Signature	008 (Month/Year) 1/964 7/959 16/196/ 10/25/59	Length of time Acquainted with the Applicant(s)  30 yes  2 yes  15 yes  20 yes

Name and Address of the owne	's of the premise/landlord:		_Phone Number: _	_
	IWNER OF PREMISES REQUIRED IN CONNECT			
(I. WE)	HER Baltimore, City with	REBY CRTIFY, That (I am, we are) the ov	vner(s) of the prope	erty located at
h 1 . 0	, Baltimore, City with	a Zip Code of	which is name	ed in the preser
abbucación viade co dosud di ci	lact riceuse rowwiszinuetz of carrimote Pith	under the Alcondic deverage Laws of	maryiano ano assei	ur ro rus - Avau
	y authorize the State Comptroller, his duly auth			
	its duly authorized agents and employees, and			
ano searco, without warrant, the conducted, at any and all hours.	premises upon which the business is to be co	noucted, and any and all parts of the d	iuliaing in which said	) Dusiness is to
conducted, at any and an near 5.				
(Witness (my, our) hand(s) and s	eal(s) this day of	in the year of		
WITNESS:				
STATE OF MARYLAND				
	day of			
Before the subscriber a notary o	day of ublic of the State of Maryland, personally appea	ered		
and a management of the state of the	some of the other of Mai France, her suitany appea	# 60		
and acknowledge the execution o	f the aforegoing statement to be		-	act.
(Witness my hand and seal)				
Notary Public				
•				
Names	Address	Signature	DOB	Length of t
			(Month/Year)	Acquainted the Applicat
Michael	1605/AUTERS ST Balt, M.D. 21217 1631 Laurens ST	116 11	11-1	file Applicati
Johnson	Balt. 44 21217	Mer gr	0127/57	11-41
VERNAL LEZ	16311 aurens 51	11/197	0.	-
201 2 cm 201 25 cm	21217	Charles of	1-2-39	9 415
Davis	1222, 01		11	1
Johnson	N GILMON J	Mach	11/06/49	241
-5× 11. 12	- 1 . 4	1 /100-	11/	1,
(F) Chilip	1217N Flan 8	1 DOLL	04/02/51	1 /2/
			01	- 1
Styrkon C	1223 N GLIMOR	V SA Storen C	012615	5VE
	FOR OFFICE	USE ONLY		
1				
DATE FILED: 9/115 NEV	V/TRANSFER/EXPANSION - \$500.00 PAID: 🗹 I	INCTINE DATE 9/3/15	Status of A	
AND THE MEN	IN TRANSPORT FOR AND THE PROPERTY OF THE PROPE	FUSHING DATES 112/12	Approved: Yes 🗆	No 🗆
SUSTITUTE APPLICATION FEE -	\$250.00 PAID 🗆 PRINT NAME OF BLLC STAFF_	INTIIALS	Date: Rur leitiste:	
	_		BLLC Initials:	<del></del>
Board of Liquor License Com	missioners For the City of Baltimore, 231		Withdrawn: Yes 🗆	□ No □
	or, Baltimore, Maryland 21202		Date:	
Phone: 410-396-4377 Fax: 4	III-396-4387		BLLC Initials:	

		Phone Number:			
STATEMENT OF OW	NER OF PREMISES REQUIRED IN CONNECTIO	IN WITH ALCOHOLIC BEVERAGES L	AW DFMARYLAND	)	
WE)	HERE	BY CRT!FY, That (I am, we are) the ov	wner(s) of the prope	erty located at	
prication made to board of Liqui e license applied for, and hereby a immissioners of Baltimore City, it:	HERE	nder the Alcoholic deverage Laws of rized deputies, inspectors— and cle any peace officer of the City of Balt	r maryland and asse rks, the Board of Lid imore and State of I	nt to the - granting Juor License Maryland, to inspec	
litness (my, our) hand(s) and seal	(s) this day of	in the year of			
		,			
TATE OF MARYLAND	day ofday of ic of the State of Maryland, personally appear	ed			
rd acknowledge the execution of ti	ne aforegoing statement to be		· · · · · · · · · · · · · · · · · · ·	act	
Vitness my hand and seal) otary Public	to droi egoing attacement to be		******		
resent application is to be co r a taxpayer of Baltimore Cit	inducted, certify that the qualifying app y and a resident of the State of Maryla	olicant(s) is/are personally kn and for 2 years preceding this	own to us and ha application.	s been a resido	
resent application is to be corrected at the corrected at	inducted, certify that the qualifying apply and a resident of the State of Maryla  Address	olicant(s) is/are personally kn and for 2 years preceding this Signature	own to us and ha application.  DOB  (Month/Year)	Length of time Acquainted with the Applicant(s	
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Names Names Names Nakhara Brunso	Address  Address  Address  ACCO Cook  FOR OFFICE L	Signature Signature Section Declaration SE ONLY	application.  DOB (Month/Year)  JO/48  Status of A	Length of tim Acquainted wi the Applicant	
DATE FILE OF THE NEW/T	Address  Address  Address  ACCO Cook	Signature Signature Section Declaration SE ONLY	DOB (Month/Year)  JO/48	Length of tim Acquainted wi the Applicant  Sylu  pplication No	

+



### **Liquor Board System**

### Version 1.0

Annual-Renewal ▼ | License-Transfer ▼ | One-Day ▼ | Add New License ▼ | Query ▼ | Help ▼

### License Detail

Close the License

**Print License** 

Print Renewal Letter

<< Go Back

License Info

License Num: LBD7 324

Cert Num: 0884

Fee: \$1,320.00 Status: Renewed

License Date:5/1/2015

License Year: 2015

CR Number: 14574050

Payment Date: 04-29-15

2014 - 2015 TPP Paid 🔲

2015 Trader's License

Update Info

Click to Start License Renewal

### **Add Adult Entertainment License**

Add New Adult Entertainement License

### Location

Corp Name: 1609 LAURENS STREET, LLC

Trade Name: CLUB BAR

Zone Code: 30

Phone: 410-225-0113

Block Num: 1609

Street: LAURENS STREET

City: BALTIMORE

State: MD Zip: 21217

CR Number: 14574050

Portion of Business Used:

RES. N.C.U. APPR. FIRST FLOOR FOR BUSINESS & BASEMENT FOR STORAGE

Restriction:

VERNON D. TURNER & JEROME JOSEPH WILLIAMS BARRED FROM PREMISES IN ANY CAPACITY.

> Edit the License Location Info Alternate Mailing Address

### License Owners

First Name	Last Name	Street	City	State	Zip	Action	Change Owner
KEUM NAN	KIM	3741 BONNYBRIDGE PLACE	ELLICOTT CITY	MD	21043	Edit	Remove Owner

### Comments

Date	Comment	Action

	07/30/2014	07/24/2014 Public Hearing Violation of Rule 4.01(a) (re April 11,2014 alcholic beverage sold to an underage police cadet) GUILTY Fine \$500 Admin Fee \$125 Total \$625 60 days to pay	Delete
ľ	3//18/2011	APPROVED	Delete
H		Laurens Street, LLC	Delete
Į	33/01/2004	10/24/98 Police responded for street disturbance involving 50-75 i people CC 7J-17251	Delete

Print History (Print Card)

License num: LBD7 324

Address: 1609 LAURENS STREET

Trade Name: CLUB BAR

Comment:

Add Comment

**Hold Info** 

Powered by:

### **Transfer of Ownership**

Applicant(s):

Orla Kane & Zaynep Tasoemir

336 Charles, LLC T/a HomeSlyce

336 N. Charles Street

Class "B" Beer, Wine & Liquor License

Application to transfer ownership

### **Board's Information:**

Attached is a copy of the application, interview form and map.

Community Letter(s)/ Memorandum of Understanding: None as of file date

Last Inspection Date: September 3, 2015 posting date

SDAT: In Good Standing (Active)

### **BOARD'S DECISION:**

Maryland Department of Assessments and Taxation Business Services (w4)

Search Help

Entity Name: 336 CHARLES, LLC

Department ID: W14800775

General Information

**Amendments** 

**Personal Property** 

**Certificate of Status** 

### Principal Office (Current):

316 N. CHARLES STREET BALTIMORE, MD 21201

### Resident Agent (Current):

FREDA BYRNES 316 N. CHARLES STREET BALTIMORE, MD 21201

Status:

**ACTIVE** 

Good Standing:

Yes

What does it mean when a business is not in good standing or forfeited?

**Business Code:** 

Other

Date of Formation or Registration:

08/03/2012

State of Formation:

MD

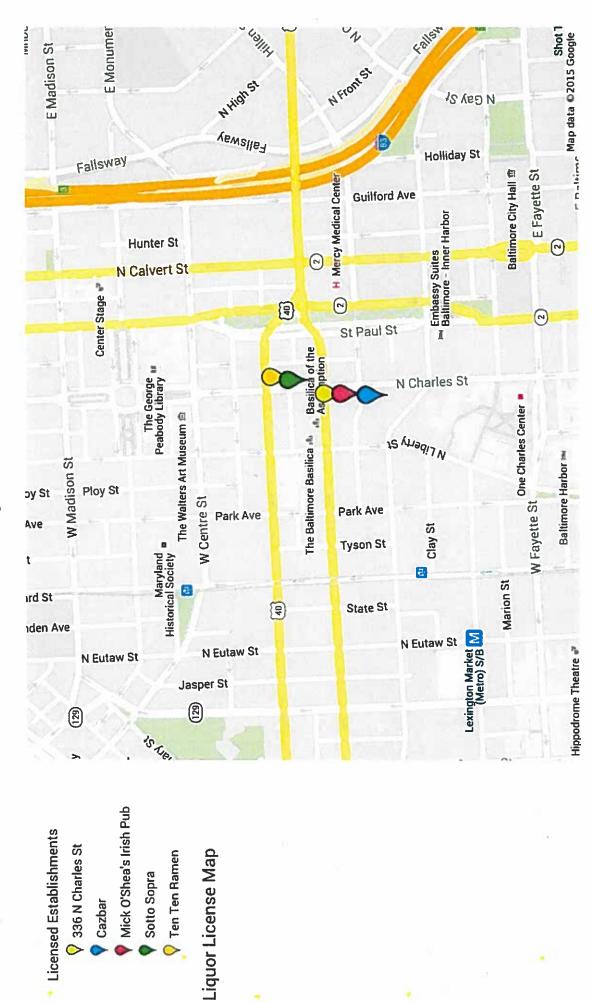
Stock/Nonstock:

N/A

Close/Not Close:

Unknown

## 336 N Charles Street - Home Slyce



### Application for Alcoholic Beverages License Board of Liquor License Commissioners for Baltimore City

CLASS TYPE: B LICENSE AT THE L	OCATION: Existing Location.	336 N Charles	<u> </u>	TRANSER, LOCATION: Change	of Licensee
CORPORATE/LLC/LLP/PARTNER					
ATTORNEY FOR THE APPLICANT:	A Hurdle AODRESS: 1	Baltim	s, Suite 400	PHONE: 4106855100	EMAIL: alh@alhurdlelaw
INDICATE TYPE OF LICENSE APP	LICATION: TRANSFER 🔽	NEW 🗆 EX	PANSION OF PRE	MISES 🗆 SUBSTITUTE 🗀	AMENDMENT(S)
Describe Part of Premises to I	se Used: First floor and bas	ement for bus	iness Will you pi	ffer delivery of food and/o	r alcohol?xx Yes 🗆 No
Will Live Entertainment be pro					
Will Outdoor Table Service Be					No
Please note that as per Art. 28					
ebtained zoning approval from	the City of Baltimore Do yo	u have a Zonin	g Approval DHCC	17 🗗 s 🗀 No If yes, plea	ise attach. If no, please giv
timeframe for obtaining letter					
WORKER'S COMPENSATION INFOR	!MATION - INSURANCE CARR	IER		POLICY OR BINDER #:	
1. Applicant A					
Oria Kane 4109914731 (full name)	(telephon	in na 1	<del>_</del>	doner@cazbar.pro	La in in in
I36 W Read Street	•	iciio. <i>)</i> Itimore, MD 21	201	E-mail ( <b>R e q u</b> 2 years	ired V
(residence)Street	City	State	Zip Cade	(period of residency in Ba	ltimare City)
3/1989 (Month/Year of Birth)	F (Sex: Male or Fen	<u>lrela</u>			
2. Applicant B	u a registered voter in the	! City of Baltir		_	
Zaynep Tasoemir (full name)	<u>4438400259</u> (telephon	1	zeynep	@cazbar.pro	
334 N Charles St Baltimore, MD	(121201	ena.)		E-mail (Requ	ired)
(residence)Street	City	State	Zip Cade	(period of residency in Ba	ltimore City)
09/84 (Month/Year of Birth)	F (Sex: Male or Fen	Turkey	Dinth\		
If applicable, address of Property on					
Check:  Yes XXXX No Ha	ve you been a resident and	d taxpayer of	the City of Baltir	nore for 2 years precedin	g this application?
☐ Yes XXXX No Ar	e you a registered voter i	n the City of B	altimore?		
3. Applicant C					
(full name)	(telephon	eng.)		E-mail (Requ	ired)
(residence)Street	City	State	Zip Code	(period of residency in Ba	timare City)
(Month/Year of Birth)	(Sex: Male or Fen	nale) (Place of	Birth)		
If applicable, address of Property on	which tax is paid in your individ	lual name:			
Check: Yes No Have	you been a resident and ta ou a registered voter in th	xpayer of the	City of Baltimor	re for 2 years preceding th	nis application?
THE TEST IN MUST A	uu a redistered voter in ti	is Mill of Ralf	more?		

I. Has the applicant(s) been convicted of a felony, or has been adjudged guilty of violating the laws governing the sale of any alcoholic beverage or for gambling in any State, including Maryland?   XX No if yes, mark applicant and provide explanation in adjacent space provided.	Applicant A 🗆	BO	C	
2. State whether the applicant(s) has ever been adjudged guilty of any offense against the laws of the State of Maryland or the United States. □ Yes XXX No If yes, mark applicant and explain.	Applicant A 🗆	80	CO	
3. Has the applicant(s) ever held a license for the sale of alcoholic beverages in the State of Maryland?  Yes XXXX No If yes, explain.	Applicant A 🗆	BO	C -	
4. Has the applicant(s) ever had a liquor license suspended or revoked? ☐ Yes XXX No If yes, explain in adjacent space.	Applicant A 🗆	B 🗆	C	
5. Does the applicant(s) have a pecunlary interest in any other alcoholic beverage business or business for which alteense has been applied for, granted, and issued?   Explain in adjacent space.	Applicant A 🗆	B□	<b>C</b>	
6. Is your spouse or child a licensee, in this jurisdiction or any other, and does he or she have any finan <b>cial interest</b> in any other alcoholic beverage business?   Yes XXXX No II yes, explain.	Applicant A 🗆	B ()	C	
7. Is there now, or will there be, during the continuance of the license applied for, any other person financial interested in said license or business to be conducted thereunder?   Yes No If yes, explain in the adjacent space provided.	O Kane 1% interest. 336 N Charles LLC 9		enir 1%	
B. lo-the licensed premises presently open and operating?  Yes  No If no, please provide information requested in adjacent space provided.	Closure Date: Explanation:			
9. Do any of the applicant(s) have any indebtedness or other financial obligations to any manufacturer, brewer, distiller, or wholesaler at the time of making this application?  Description of the manufacturer of indebtedness, and the applicant(s) indebted, the amount of indebtedness, and the name of the manufacturer, brewer, distiller, or wholesaler in the adjacent space provided.				

ID. Please list the following, if applicable, in the spaces provided below: Purchase Price of Owner of the Real Cost of the Real Cost of the Cost of the Down Payment Terms for the Business Property Property Business Personal provided to seller Balance due Property Change of LICENTICE II. Please list the following information for the Manager of the establishment to be licensed: Name Address Phone Email Applicants Applying as Business Entities - (Give name(s) and addresses - in Corporation list all officers (attach list if necessary) or in Limited Liability Company/Partnerships list all authorized persons.) Kave ADDRESS: 136 W Pend TITLE: Secretary STOCK HELD THE ayner Tascemir Address 584 polyarics TITLE: Treasurer % of STOCK HELD PRESIDENCE: ADDRESS: \_\_\_\_\_TITLE:\_\_\_\_ %OF STOCK HELD RESIDENCE: ADDRESS: TITLE: 4) NAME: %OF STOCK HELD RESIDENCE: \*\*\*\*\*\*Attached is a list of the names and addresses of all outstanding stockholders who on the day of this application own more than 5% of the outstanding stock of the corporation and the articles of incorporation, partnership agreement or articles of organization.\*\*\*\*\*\* \*Extract from Law: If any affidavit or oath required under the provisions of this Act shall contain any false statements, the offender shall be deemed guilty of perjury. And upon indictment and conviction thereof, shall be subject to penalties provided by Law for that crime. CERTIFICATE OF APPLICANTS: At least one applicant whose signature appears below certifies that he/she has been a resident and taxpayer of Baltimore City. Maryland for at least two years preceding the filing of this application. Each of said applicants hereby certifies further that if the license applied for is granted, he/she will conform to all State and County laws and regulations relating to the sale of alcoholic beverages, as well as to the rules and regulations of the Board of License Commissioners for Baltimore City, and herby grants permission to the State Comptroller, his duly authorized deputies, inspectors and clerks. The Board of License Commissioners for Baltimore City, its duly authorized agents and employees, and any peace officer of Baltimore City or the State of Maryland to inspect and search at any and all hours, without warrant, the premises and any and all parts thereof upon and in which said business is to be conditated. Signature of Applicant A Signature of Applicant B Signature of Applicant C State of Maryland: THIS CERTIFIES, THAT ON THE OF before the subscriber a notary public of the State of Maryland, personally appeared Orla Kane The applicant (s) names in the aforegoing application, and made oath in due form of law that the statement the knowledge and belief. lame Notary Public (Witness my hand and seal)

Name and Address of the ow	ners of the premise/landlord: $\mathcal B$	FLLC	Phone Number	240 5	936929		
STATEMENT O	F OWNER OF PREMISES REQUIRED IN CONNEC	TION WITH ALCOHOLIC BEVERAGES	LAW OF MARYLA	ND			
Commissioners of Baltimore C	Baltimore, City wit Liquor License Commissioners of Baltimore Cit eby authorize the State Comptroller, his duly auity, its duly authorized agents and employees, and premises upon which the business is to be	thorized deputies, inspectors—and c d—any peace officer of the City of Ba	which is na of Maryland and as: lerks, the Board of I altimore and State o	med in the present sent to the granting liquor License f Marvland, to inspec			
(Witness (my, our) hand(s) and	seal(s) this 3/ day of 1/	in the year of 20	29	. •			
WITNESS:	21	Acut					
STATE OF MARYLANO  THIS CERTIFIES, THAT ON  Before the subscriber a notary public of the State of Maryland appears and acknowledge the execution of the aforegoing spreson to be subscribed and and seal)  (Witness my hand and seal)  Notary Dublic  STATE OF MARYLANO  LARY  Co. The Luce Paylud  Notary Dublic  Notary Dublic  STATE OF MARYLANO  AND							
The following certificates must be signed by a least 3 persons.  We, the undersigned citizens, real estate owners and registered voters in the City of Baltimore in which the business covered by the present application is to be conducted, certifying applicant(s) is/are personally known to us and has been a resident or a taxpayer of Baltimore City and a resident of the state of Maryland for 2 years preceding this application.							
or a taxpayer of Baltimore	Lity and a resident of the state of the	Nand for 2 years preceding this	s application.		•		
Names	Address	Mand for 2 years preceding this  Signature	s application.  OOB (Month/Year)	Length of time Acquainted with the Applicant(s)			
Names	Address		DOB	Acquainted with the Applicant(s)			
Names			DOB	Acquainted with			
Names	2609 Cighthale Los y		DOB	Acquainted with the Applicant(s)			
Sestin Durkin e	2609 Cightale Lo y		DOB (Manth/Year)	Acquainted with the Applicant(s)			
Sestin Durkin e	2609 Cightale Lo y	Signature  Chules & Attender  Mary Whenrithe	DOB (Manth/Year)	Acquainted with the Applicant(s)			
Sestin Dorkin a Charles L. litter Mary atterreithe	2609 Cightes Lo y reither 6268. Feneral r 6265. Kenwad Ave.	Signature  Signature  Chules & Attorno  Mary Whenruthe  USE ONLY  POSTING DATE: 9 315	008 (Month/Year)	Acquainted with the Applicant(s)  2,5  Application  No   No			

\*Please present/draw a Floor Plan/Rendering of the Licensed Premises here. If you have a professionally drafted rendering, please attach it to the application.\*

PLEASE SEE EXISTING FLOOR PLAN IN FILE



### **Liquor Board System**

### Version 1.0

Annual-Renewal ▼ | License-Transfer ▼ | One-Day ▼ | Add New License ▼ | Query ▼ | Help ▼

### License Detail

Close the License

Print License

Print Renewal Letter

<< Go Back

License Info

License Num: LB 203

Cert Num: 0950

Fee: \$1,320.00 Status: Renewed

License Date:5/1/2015

License Year: 2015

CR Number: 14935204

Payment Date: 04-21-15

2014 - 2015 TPP Paid V

2015 Trader's License 🗍 N

Update info

Click to Start License Renewal

### Add Adult Entertainment License

Add New Adult Entertainement License

### Location

Corp Name: 336 CHARLES, LLC Trade Name: HOMESLYCE

Zone Code: 25

Phone: 443-501-4000

City: BALTIMORE

Block Num: 336

Street: CHARLES STREET NORTH

State: MD

Zip: 21201

CR Number: 14935204

Portion of Business Used:

USE MAIN LEVEL AND BASEMENT OF PREMISES AS A RESTAURANT AND BAR INCLUDING LIVE ENTERTAINMENT AND/OR DANCING; LICENSEE MAY PROVIDE OFF PREMISES

Restriction OF FOOD & ALCOHOL.

Edit the License Location Info

Alternate Mailing Address

### **License Owners**

First Name	Last Name	Street	City	State	Zip	Action	Change Owner
FREDA S.	BYRNES	336 N. CHARLES STREET	BALTIMORE	MD	21201	Edit	Remove Owner

### Comments

Date	Comment	Action	
		**	

03/27/2015	03/2/2015 Alcohol Awareness Course John S Murray (Emre Bekats, Zeyneo Tasdemir, Dogan Sails, Brain Lanzo and levgenly Ysenko ) expires 03/02/2019	Delete
1	9/13/2012 Public Hearing re: Application to transfer ownership and add outdoor table service. APPROVED.	Delete
08/09/2012	8/12 Transfer of ownership, request to add outdoor table service, B-BWL restaurant license, Freda Byrnes, 336 Charles, LLC	Delete
06/10/2011	6/2/11 Public Hearing re: Application to transger ownership of Class "B" Beer, Wine & Liquor License and request to add live entertainment, outdoor table service & off premises catering.  APPROVED	Delete
06/06/2011	5/5/11 Public Hearing re: Request for a hardship extension under the provisions of Article 2B section 10-504(d). GRANTED - 180 DAYS EXTENSION FROM 5/5/11.	Delete
10/28/2010	8/5/10 Public hearing re: application to transfer ownership and request to add outdoor table service. APPROVED (Use permit for outdoor table service not presented at the time of transfer)	Delete

Print History (Print Card)

License num: LB 203

Address: 336 CHARLES STREET NORTH

Trade Name: HOMESLYCE

Comment:

Add Comment

**Hold Info** 

Powered by:

### **Transfer of Ownership**

Applicant(s):

Jacqueline Beal

BSq. Wine Co. T/a Grand Cru

5911 York Road

Class "BD7" Beer, Wine & Liquor License

Application to transfer ownership

### **Board's Information:**

This was previously on March 5, 2015. This simply removes one of the previous licensees. The current applicant is already on the license.

Attached is a copy of the application, interview form and map.

Community Letter(s)/ Memorandum of Understanding: None as of file date

Last Inspection Date: September 3, 2015 posting date

SDAT: In Good Standing (Active)

### **BOARD'S DECISION:**

Maryland Department of Assessments and Taxation Business Services (w4)

Search Help

Entity Name: BSQ WINE CO LLC

Department ID: W16225823

General Information

**Amendments** 

Personal Property

**Certificate of Status** 

### Principal Office (Current):

16TH FLR 100 N CHARLES ST BALTIMORE, MD 21201

### Resident Agent (Current):

STEPHEN KAUFMAN 16TH FLR 100 N CHARLES ST BALTIMORE, MD 21201

Status:

**ACTIVE** 

Good Standing:

No

What does it mean when a business is not in good standing or forfeited?

**Business Code:** 

Other

Date of Formation or Registration:

12/09/2014

State of Formation:

MD

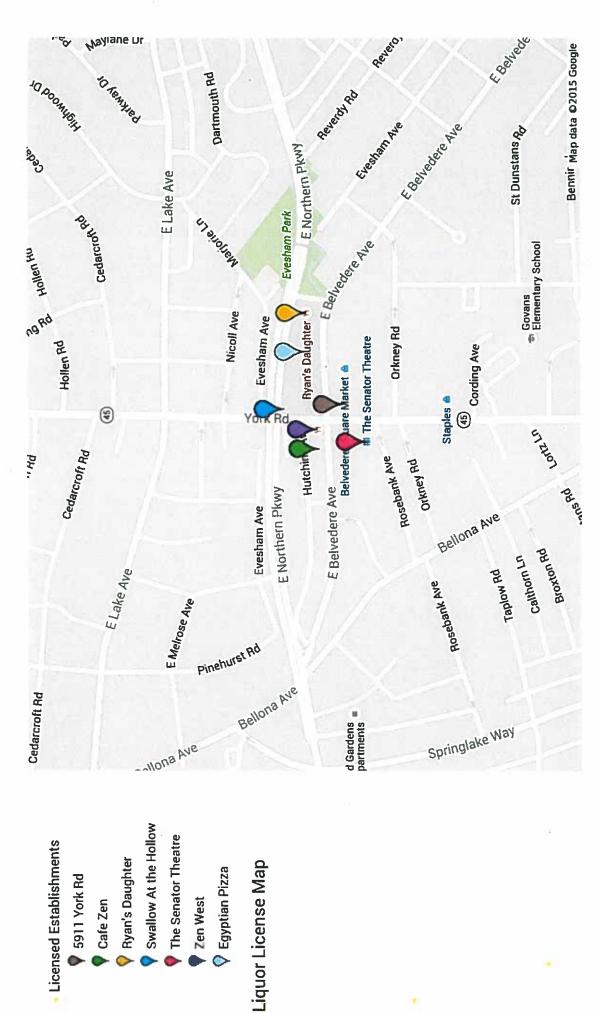
Stock/Nonstock:

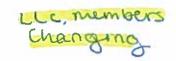
N/A

Close/Not Close:

Unknown

### 5911 York Road - Grand Cru





### Application for Alcoholic Beverages License Board of Liquor License Commissioners for Baltimore City

	HE LOCATION: 327 E. Deived	ere Ave. 21212	IF TRANSER, LO	CATION: Same Location
CORPORATE/LLC/LLP/PARTNERSI	HIP NAME: <u>BSq. Wine Co.</u> 1	RADE NAME: <u>G</u> e	and Cru	**
ATTORNEY FOR THE APPLICANT: C:	aroline L. Hecker, Esq. ADDF		harles Street	, 21 <sup>st</sup> Floor PHONE: 410-727-6600 EMAIL:
Checker@rosenbergmartin.com				
NDICATE TYPE OF LICENSE APPLI	ICATION: TRANSFER 🖾	NEW 🗆 EXI	ANSION OF PREM	AISES 🗆 SUBSTITUTE 🗆 AMENDMENT(S) 🗆
Describe Part of Premises to be	Used: Entire Premises	Will you offer	delivery of foo	d and/or aicohol? □ Yes 🛭 No
Vill Live Entertainment be provi	ided? □Yes ⊠ No Wha	t Kind?		
Nill Outdoor Table Service Be P	ravided? 🛛 Yes 🗌 No	Off Premise (	Catering of Food	and Alcohol? □ Yes ☑ No
lease note that as per Art. 2B §	§10-202(a)(iv)(1) that an ap	pplication for 1	he issuance or t	ransfer is not complete unless the applicant ha
			Approval DHCO	? ⊠Yes □ No if yes, please attach. If no, plea
imeframe for obtaining letter of	f approval: This use is allo	wed by-right		
NORKER'S COMPENSATION INFORM	MATION – INSURANCE CARRI	ER Trumbi	II Insurance	POLICY OR BINDER #: 21630
. Applicant A		D 010 000		A dia Managara
Jacqueline A. Beal (full name)	41 (telephon	0-218-8024 eno.)		beal.jackie.egmall.c
(residence) Street	•	_	7:_ [*]_	
All Medfield Avenue	City Baltimore	State MD	Zip Code 21211	(period of residency in Baltimore City) 4 years 1 manth
Month/Year of Birth)	(Sex: Male or Fem			4 years i munita
facebackle adding a CB	which tax is naid in your individ	ual name: 1411 N		altimore, MD
If applicable, address of Property on v				
Check: 🛛 Yes 🗆 No Have y	you been a resident and ta			re for 2 years preceding this application?
Check: ⊠ Yes □ No Have y ⊠ Yes □ No Are yo				re for 2 years preceding this application?
Check: ⊠ Yes □ No Have y ⊠ Yes □ No Are yo	you been a resident and ta			re for 2 years preceding this application?
Check: 🛛 Yes 🗌 No Have y 🖾 Yes 🗆 No Are yo 2. Applicant B	you been a resident and ta	e City of Balt		re for 2 years preceding this application?  E-mail (Required)
Check: Ves No Have y Ves No Are yo Applicant B	you been a resident and ta ou a registered voter in th	e City of Balt		
Check:	you been a resident and ta ou a registered voter in th (telephon	e no.) State	m <b>ore?</b> Zip Code	E-mail (Required)
Check: Yes No Have y Yes No Are yo  Applicant B  (full name)  (residence) Street  (Month/Year of Birth)  If applicable, address of Property on the	you been a resident and ta ou a registered voter in th (telephon City (Sex: Male or Fen which tax is paid in your individ	e no.) State nale) (Place of	more?  Zip Code  Birth)	E-mail(Required) (period of residency in Baltimore City)
Check: Yes No Have you  Yes No Are you  Applicant B  full name)  residence) Street  Month/Year of Birth)  f applicable, address of Property on the Check: Yes No Have you	you been a resident and ta ou a registered voter in th (telephon City (Sex: Male or Fem which tax is paid in your individ you been a resident and ta	e no.) State nale) (Place of lual name:	Zip Code Birth)  City of Baltimo	E-mail (Required)
Check: Yes No Have you  Yes No Are you  Applicant B  Full name)  Fresidence) Street  Month/Year of Birth)  Fapplicable, address of Property on the Check: Yes No Have you	you been a resident and ta ou a registered voter in th (telephon City (Sex: Male or Fen which tax is paid in your individ	e no.) State nale) (Place of lual name:	Zip Code Birth)  City of Baltimo	E-mail(Required) (period of residency in Baltimore City)
Check: Yes No Have you Yes No Are you Applicant B  (full name)  (residence) Street  (Month/Year of Birth)  If applicable, address of Property on the Check: Yes No Have you	you been a resident and ta ou a registered voter in th (telephon City (Sex: Male or Fem which tax is paid in your individ you been a resident and ta	e no.) State nale) (Place of lual name:	Zip Code Birth)  City of Baltimo	E-mail(Required) (period of residency in Baltimore City)
Check: Yes No Have y  Yes No Are you  Applicant B  full name)  residence) Street  Month/Year of Birth) fapplicable, address of Property on the Check: Yes No Have you  Yes No Are you	you been a resident and ta ou a registered voter in th (telephon City (Sex: Male or Fem which tax is paid in your individ you been a resident and ta	e no.) State nale) (Place of lual name: Expayer of the lie City of Balt	Zip Code Birth)  City of Baltimo	E-mail(Required) (period of residency in Baltimore City)
Check: Ves No Have you Ves No Are you Applicant B  full name)  residence) Street  Month/Year of Birth)  fapplicable, address of Property on the Check: Ves No Are you No Are you Applicant C	you been a resident and ta ou a registered voter in th (telephon City (Sex: Male or Fen which tax is paid in your individ you been a resident and ta ou a registered voter in th	e no.) State nale) (Place of lual name: Expayer of the lie City of Balt	Zip Code Birth)  City of Baltimo	E-mail ( <b>R e q u i r e d</b> )  (period of residency in Baltimore City)  re for <b>2</b> years preceding this application?
Check: Yes No Have you Yes No Are you Applicant B  full name)  residence) Street  Month/Year of Birth)  fapplicable, address of Property on the check: Yes No Are you Yes No Are you  Applicant C  full name)	you been a resident and ta ou a registered voter in th  (telephon  City  (Sex: Male or Fen which tax is paid in your individ you been a resident and ta ou a registered voter in th	e no.)  State  nale) (Place of lual name:	Zip Code Birth) City of Baltimorimore?	E-mail (Required)  (period of residency in Baltimore City)  re for 2 years preceding this application?  E-mail (Required)

ID. Please list the following, if applicable, in the spaces provided below

X

Purchase Price of Business * °	Owner of the Real Property	Cost of the Real Property	Cast of the Business	Cast of the Personal Property	Down Payment provided to seller	Terms for the Balance due
	Belvedere Haldings, LLC	\$6,639/manth				JC H

11	. Please list the following information	in for the Manager of the establishment to be	licensed:	the second second
	Neme	Address	Phone	Fmail

Name	Address	Phone	Email
Jack Wells	305 Hopkins Rd.	443-632-4528	N/A
Applicants Applying as Business Entities Company/Partnerships list all authorize		oration list all officers (attach list if necess	ary) or in Limited Liability

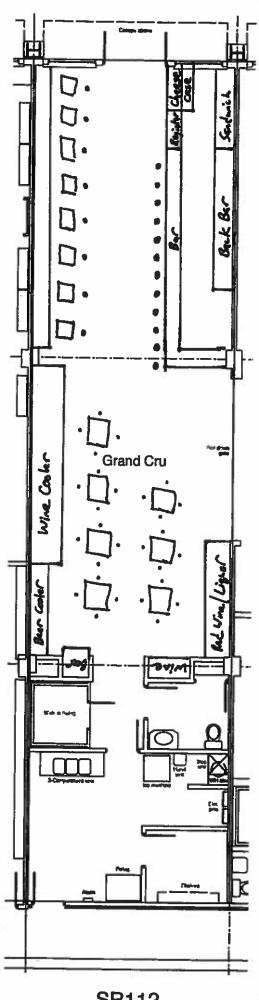
I) NAME: <u>Jacqueline A. Beal</u>	ADDRESS: 1411 Me	dfield AveTITLE:President _9	KOF STOCK HELD RESIDENCE: 100%
2) NAME:	ADDRESS:	TITLE:	60F STOCK HELD RESIDENCE:
3) NAME:	ADDRESS:	TITLE:	60F STOCK HELD RESIDENCE:
4) NAME:	ADORESS:	TITLE:	KOF STOCK HELD RESIDENCE:

\*\*\*\*\*\*Attached is a list of the names and addresses of all outstanding stockholders who on the day of this application own more than 5% of the outstanding stock of the corporation and the articles of incorporation, partnership agreement or articles of organization.\*\*\*\*\*

\*Extract from Law: If any affidavit or oath required under the provisions of this Act shall contain any false statements, the offender shall be deemed guilty of perjury. And upon indictment and conviction thereof, shall be subject to penalties provided by Law for that crime.

CERTIFICATE OF APPLICANTS: At least one applicant whose signature appears below certifies that he/she has been a resident and texpayer of Baltimore City, Maryland for at least two years preceding the filing of this application. Each of said applicants hereby certifies further that if the license applied for is granted, he/she will conform to all State and County laws and regulations relating to the sale of alcoholic beverages, as well as to the rules and regulations of the Board of License Commissioners for Baltimore City, and herby grants permission to the State Comptroller, his duly authorized deputies, inspectors and clerks. The Board of License Commissioners for Baltimore City, its duly authorized agents and employees, and any peace officer of Baltimore City or the

to be conducted.	any and all hours, without warrant, the premises and a	any and all parts thereof upon and in which said busines
Signature of Applicant A	Signature of Applicant B	Signature of Applicant C
State of Maryland: Pelange	County ss	
THIS CERTIFIES. THAT ON THE 27	OF August 2	95
before the subscriber a notary public of the	State of Maryland, personally appeared	William Carellin
Joequeline Deal		HILLS AN SONES THE
The applicant(s) names in the aforegoing app	olication, and made oath in due form of law that the state	ment therein ares true to the best of (b)s, her, their)
knowledge and belief.	1	O DIARY
•	Xusau This	
	Notary Public	11 00 50 WHILL
(Witness my hand and seal)		PUBLIC OLON SOLO SOLO SOLO SOLO SOLO SOLO SOLO



SR112

\*Please present/draw a Floor Plan/Rendering of the Licensed Premises here. If you have a professionally drafted rendering, please attach it to the application.\*

### Transfer of Ownership

Applicant(s):

Arjinder Singh & Michael Bradley,

A & J Tavern, Inc. T/a J & J Bar & Liquor

1801 Ramsey Street

Class "BD7" Beer, Wine & Liquor License

Application to transfer ownership

### **Board's Information:**

Attached is a copy of the application, interview form and map.

Community Letter(s)/ Memorandum of Understanding: None as of file date

Last Inspection Date: September 3, 2015 posting date

SDAT: In Good Standing (Active)

### **BOARD'S DECISION:**

### Maryland Department of Assessments and Taxation Business Services (w4)

Search Help

Entity Name: A & J TAVERN, INC.

Department ID: D16733297

**General Information** 

Amendments

**Personal Property** 

Certificate of Status

Principal Office (Current):

801 RAMSEY STREET BALTIMORE, MD 21223

Resident Agent (Current):

ARJINDER SINGH

24 SPRINGTOWNE CIRCLE PARKVILLE, MD 21234

Status:

**INCORPORATED** 

Good Standing:

Yes

14

What does it mean when a business is not in good standing or forfeited?

Business Code: Ordinary Business - Stock

Date of Formation or Registration:

08/31/2015

State of Formation:

MD

Stock/Nonstock:

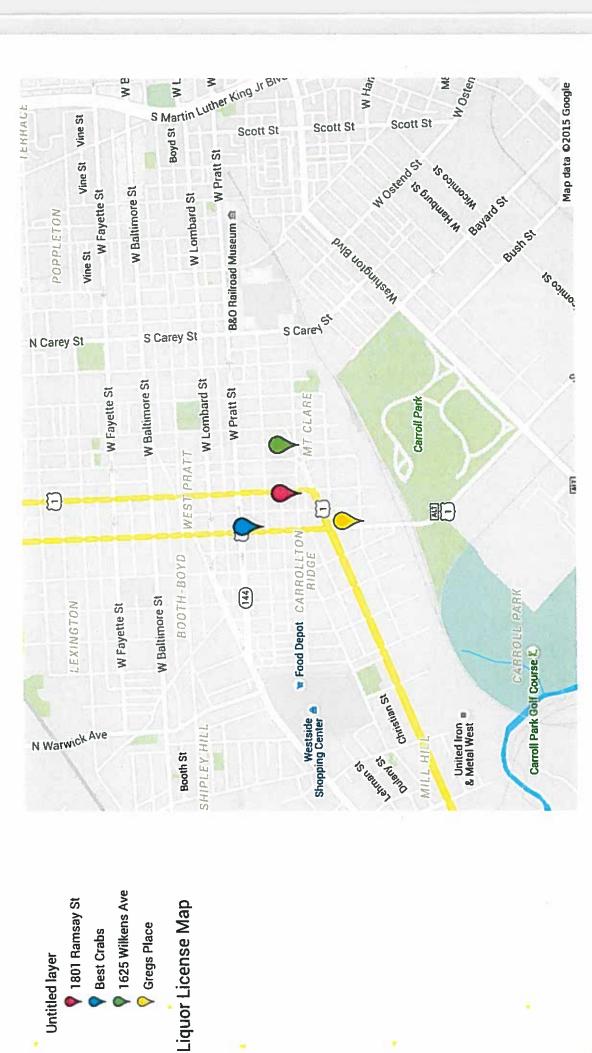
Stock

Close/Not Close:

Close

# 1801 Ramsay Street - A & J Tavern

**Untitled layer** 



### Application for Alcoholic Beverages License Board of Liquor License Commissioners for Baltimore City

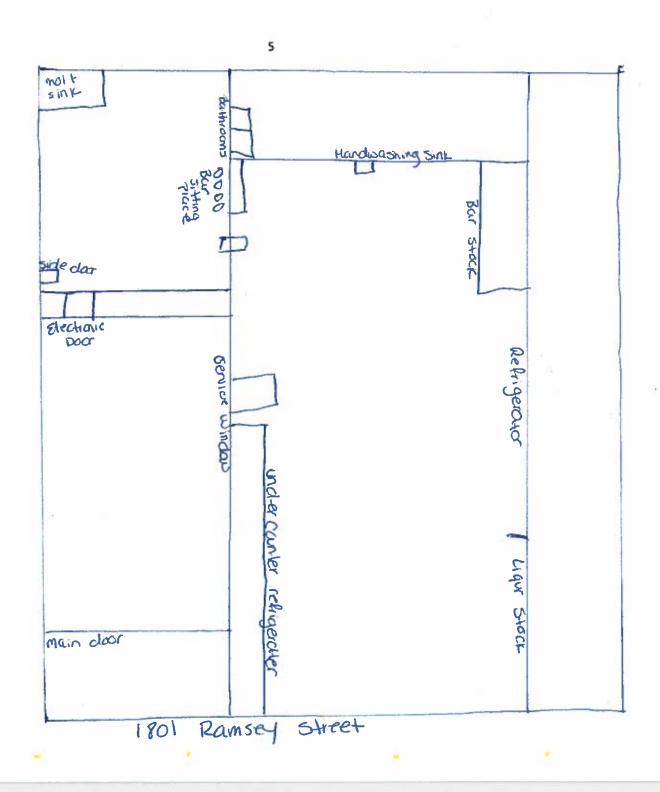
CLASS TYPE: LBPLICENSE AT TH		
	NAME: ARJ Tavern, Inc TRADE NAME: J&J Bor & Liga	
ATTORNEY FOR THE APPLICANT:	e vin J ADDRESS 19 E. FO.Vefte PHONE 410685-SKEMAIL melving	Lodenski ahotmail
INDICATE TYPE OF LICENSE APPLIC		storage
Describe Part of Premises to be	sed: Ut Flour For billiness and basement For Will you offer delivery of food and/or alcohol? I Yes 1270	3 to colde
Will Live Entertainment be provid	d? 🗆 Yes 🖼 No What Kind?	
Will Outdoor Table Service Be Pr	rided? 🗆 Yes 🕠 No 🛮 Off Premise Catering of Food and Alcohol? 🗀 Yes 🐯 No	
Please note that as per Art. 28 §	-202(a)(Iv)(I) that an application for the issuance or transfer Is not complete unless the applicant has	
	City of Baltimore Oo you have a Zoning Approval DHCO? 🗀 Yes. 🗀 No If yes, please attach. If no, please give	
timeframe for obtaining letter of	iproval:	
WORKER'S COMPENSATION INFORM	TIDN - INSURANCE CARRIERPOLICY OR BINDER #:	
1. Applicant A in der	ingh 443-271-7994 LAdishotra 77 0	phw.com
(full name) Spring to	whe circle Parkville, Md 21234	
(residence)Street	Lity State Zig Lode (period of residency in Baltimore City)	
(Month/Year of Birth)	(Sex Male or Female) (Place of Birth)	
	ch tax is paid in your individual name:	
Check: 🗆 Yes 🐼 Ng Have y	been a resident and taxpayer of the City of Baltimore for 2 years preceding this application?	
LI TES IN MO APE YO	a registered voter in the City of Baltimore?	
2. Applicant B	Edward Bradley 517. bradley@gmail	COM
(full name)	(telephone no ) F-mail (Renuired)	
(residence)Street	arey ST Baltimore MID 21223 3140	
Tresidence/atreet 1/-28	57 City State Zip Code (period of residency in Baltimore City)	
(Month/Year of Birth)	(See Maje or Female) (Place of Birth)	CI
If applicable, address of Property on v	ch tax is paid in your individual name: 51/N. Carey	57.
Yes No Are yo	been a resident and taxpayer of the City of Baltimore for 2 years preceding this application?  or registered voter in the City of Baltimore?	
3. Applicant C	•	
(full name)	(telephoneno.) E-mail (Required)	
(residence)Street	City State Zip Code (period of residency in Baltimore City)	
(Month/Year of Birth)	(Sex Male or Female) (Place of Birth)	
	ich tax is paid in your individual name:	
Uneck: ☐ Yes ☐ No Have y	been a resident and texpayer of the City of Baltimore for 2 years preceding this application? a registered voter in the City of Baltimore?	

1. Has the applicant(s) been convicted of a felony, or has been	Applicant A 🗹 8 🗹 C 🗆
adjudged guilty of violating the laws governing the sale of any alcoholic beverage or for gambling in any State, including Maryland?   Yes No If yes, mark applicant and provide explanation in adjacent space provided.	No No
	Applicant A 🗹 B 🗹 C 🗆
2. State whether the applicant(s) has ever been adjudged guilty of any offense against the law of the State of Maryland or the United States. □ Yes No If yes, mark applicant and explain.	No No
3. Has the applicant(s) ever held a license for the sale of alcoholic	Applicant A 🖾 🛭 B 🖾 C 🗆
beverages in the State of Maryland? 🗆 Yes 👿 No If yes, explain.	NO NO
4. Has the applicant(s) er had a liquor license suspended or	Applicant A 🗆 B 🗆 C 🖸
revoked? 🗆 Yes 👣 No if yes, explain in adjacent space.	MA N/A
5. Ooes the applicant(s) have a pecuniary interest in any other alcoholic beverage business or business for which a license has	Applicant A 🗆 B 🗆 C 🗀
been applied for, granted, and issued? 🗆 Yes 😿 No If yes, explain in adjacent space.	MA NIA
6. Is your spouse or child a licensee, in this jurisdiction or any other, and does he or she have any financial interest in any other	Applicant A 🗆 B 🗆 C 🗆
alcoholic beverage business? 🗖 Yes 🐯 To If yes, explain.	N/A N/A
7. Is there now, or will there be, during the continuance of the license applied for, any other person financial interested in said	
license or business to be conducted thereunder? 🔲 Yes 🐱 No If yes, explain in the adjacent space provided.	
8. Is the licensed premises presently open and operating?  ☑ Yes ☐ No If no, please provide information requested in	Closure Date:
adjacent space provided.	Explanation:
9. Do any of the applicant(s) have any indebtedness or other financial obligations to any manufacturer, brewer, distiller, or wholesaler at the time of making this application?	
☐ Yes ♥No If Yas, please provide information as to the applicant(s) indebted, the amount of indebtedness, and the name of the manufacturer, brewer, distiller, or wholesaler in the adjacent space provided.	

10. Please list the foll	owing, if applicable, In t	the spaces provided by	elow:				
Purchase Price of Business		Cost of the Real Property	Cost of the Business	Cost of the Personal Property	Down Payment provided to seller	Terms for the Balance due	
	Farous: Walid	124,0	0.00	to be ted	signing of contract	50,000.00 at 50 64,000.00 to be paid in	Hllement Note
11. Please list the follo	owing information for t		ablishment to be licens	sed: ment		to be paid i	6 mont
Ham	# <b>*</b>	Address		Phone		Email	
N	IA						
Applicants Applying Company/Partnersh	as Business Entities - (f hips list all authorized pe	Give name(s) and addre	sses - in Corporation l	ist all officers (attach lis	t if necessary) or in Lim	ited Liability	
1) NAME Aryll	nder Sing	ADDRESS: Rand	lallstown, m	PILLE Memb	e %of stock held res	IDENCE: /00 0/0	10
2) NAME Mich	gel E Bru	dley 517	N. Carey	Stille Sec.	%NE STOCK HELD RES	ited Liability iDENCE: /00 /00	
		Ва	160, MP 21	223			
3) NAME:		ADDRESS:	23.1	TITLE:	_%OF STOCK HELO RES	IIDENCE:	
4) NAME:		ADDRESS:		TITLE:	_%OF STOCK HELD RES	HOENCE:	
********Attache than 5% of the organization.***	outstanding stock	nes and addresses of the corporation	of all outstanding s and the articles	stackholders who on of incorporation, pa	the day of this appli artnership agreeme	cation own more ent or articles of	
*Extract from Li shall be deemed crime.	aw. If any affidavit o I guilty of perjury. A	r oath required und nd upon indictment	der the provisions ( and conviction the	of this Act shall cont reof, shall be subject	ain any false statem t to penalties provid	ents, the offender led by Law for that	
Maryland for at lea granted, he/she wi of the Board of Lice and clerks, The Boa	st two years preceding Il conform to all State : ense Commissioners fo ard of License Commiss o inspect and search a	the filing of this appliand County laws and recounty laws and recounty laws and recounty laws and recounty and laws and all hours, with any and all	cation. Each of said ap egulations relating to t erby grants permissi City. its duly authorize	plicants heraby certifie the sale of alcoholic bev on to the State Comptro d apports and employees	s further that if the lice erages, as well as to th iller, his duly authorize and any neace officer	ne rules and regulations d deputies, inspectors r of Baltimore City or the in which said business is	
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Name and Address of the own		14 Farousi	_ Phone Number:	442-5	570-281	10
(I, WE) Na 1 d	/ VN → U	REBY CRIIFY, That (I am, we are) the i	owner(s) of the pro	ID perty located at		l
Commissioners of Baltimore Ci	Liquor License Commissioners of Baltimore City eby authorize the State Comptroller, his duly auth ty, its duly authorized agents and employees, and ne premises upon which the business is to be co	larized deputies, inspectors—and cl	of Maryland and ass erks, the Board of L	ent to the granting iquor License		
(Witness (my. our) hand(s) and	2/th //	MA in the year of 20	15.	n		
WITNESS:		V	14/1/			
STATE OF MARYLAND THIS CERTIFIES, THAT ON Before the subscriber a notary	day of the State of the Charles of the State of the Charles of the	aug aug	2015	1		
C	N S S ARY	On The	and -	arousi		
and acknowledge the execution (Witness my hand and seal) Notary Public	of the aforegoing stem in the S	his Elan	re Pape	act		
The fellowing positions	A VOVEMS	S. C. W.	V /			
THE TONOMING CELTUICATES WIT						
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\*Please present/draw a Floor Plan/Rendering of the Licensed Premises here. If you have a professionally drafted rendering, please attach it to the application.\*





### **Liquor Board System**

### Version 1.0

Annual-Renewal ▼ | License-Transfer ▼ | One-Day ▼ | Add New License ▼ | Query ▼ | Help ▼

### **License Detail**

Close the License

Print License

**Print Renewal Letter** 

<< Go Back

License Info

License Num: LBD7 379

Cert Num: 1087

Fee: \$1,320.00 Status: Renewed

License Date:5/1/2015

License Year: 2015

CR Number: 15417471

Payment Date: 05-15-15

2014 - 2015 TPP Paid [

2015 Trader's License

Update Info

Click to Start License Renewal

### **Add Adult Entertainment License**

Add New Adult Entertainement License

### Location

Corp Name: WALFAR, INC.

Trade Name: J & J BAR & LIQUORS

Zone Code: 32

Phone: 410-233-6331

Block Num: 1801

Street: RAMSAY STREET

City: BALTIMORE

State: MD Zip: 21223

CR Number: 15417471

Portion of Business Used:

USE PORTION OF PREMISES 1ST FLOOR AS A TAVERN NEW OPERATOR ZONED R-8 CLASS

3 NON-CONFORMING STATUS REMAINS NEVER CLOSED

Restriction:

Edit the License Location Info

**Alternate Mailing Address** 

### **License Owners**

First Name	Last Name	Street	City	State	Zip	Action	Change Owner
WALID	FAROUSI	6909 BEECH AVENUE	BALTIMORE	MD	21206	Edit	Remove Owner
MIKE A.	JISSRI	707 TOLNA STREET	BALTIMORE	MD	21224	Edit	Remove Owner

### Comments

Date	Comment	Action
02/11/201	10/3/2013 Public Hearing re: Application to transfer ownership. Board Approved the tranfer	Delete
06/10/200	B 06/10/08 COMPLIANCE CONF.\$100 PAID IN FULL #64188	Delete

Print History (Print Card)

License num: LBD7 379

Address: 1801 RAMSAY STREET

Trade Name: J & J BAR & LIQUORS

Comment:

Add Comment

**Hold Info** 



### **Transfer of Ownership**

Applicant(s):

Sam Chang & Ashley Rodriguez

Sambar Baltimore, LLC T/a Trade name pending

101 W. Fayette Street

Class "BHM" (Hotel-Motel) Beer, Wine & Liquor License

Application to transfer ownership

### **Board's Information:**

This is currently the Sheraton Hotel-City Center.

Attached is a copy of the application, detailed floor plans, information on other hotels and map.

Community Letter(s)/ Memorandum of Understanding: None as of file date

Last Inspection Date: September 3, 2015 posting date

SDAT: In Good Standing (Active)

### **BOARD'S DECISION:**

Maryland Department of Assessments and Taxation Business Services (w4)

Search Help

Entity Name: SAMBAR BALTIMORE, LLC

Department ID: W16706830

General Information

Amendments

Personal Property

Certificate of Status

### Principal Office (Current):

21ST FLOOR 25 SOUTH CHARLES ST. BALTIMORE, MD 21201

### Resident Agent (Current):

STUART R. ROMBRO, ESQ. 21ST FLOOR 25 SOUTH CHARLES ST. BALTIMORE, MD 21201

### Status:

ACTIVE

Good Standing:

Yes

What does it mean when a business is not in good standing or forfeited?

**Business Code** 

Other

Date of Formation or Registration:

08/11/2015

State of Formation:

MD

Stock/Nonstock:

N/A

Close/Not Close:

Unknown

## 101 W. Fayette Street - Hotel License



Liquor License Map



### Application for Alcoholic Beverages License Board of Liquor License Commissioners for Baltimore City

CLASS TYPE: LBHM- BWL LICENSE CORPORATE/LLC/LLP/PARTNERSHIP NA	AT THE LOCATION: 10			LOCATION: n/a	
			7.7	THE R. L. C. LAND CO. P. P. P. L. P.	ie un m
		:_25 S. Ch.	aries Street, 21	Floor, Baltimore, MD 21201 PHON	E: <u>41U-72</u>
EMAIL: Checker@rosenbergmartin.com					
INDICATE TYPE OF LICENSE APPLICATION	IN. TDANGCED IS	NEW IT S	ADVINION UE DOD	dses - Substitute - Amendment(s) (	_
					_
Describe Part of Premises to be Used			ffer delivery of fo	od and/or alcohol? □ Yes ⊠ No	
Will Live Entertainment be provided?	□Yes ⊠ No Wha	t Kind?			
Will Dutdoor Table Service Be Provide	:d? ⊠Yes □ Na	Off Premisi	Catering of Food	and Alcohol? 🗆 Yes 🖾 No	
Please note that as per Art. 28 §10-20	(2(a)(iv)(i) that an a	pplication for	r the issuance or t	ransfer is not complete unless the applican	t has
				? 🗹 Yes 🗖 No ii yes, please attach. li no, j	
timeframe for obtaining letter of appr					
WHOVER'S COMMENSATION INSURANTION	INCHEANCE CARD	CD H		f . Often an number a con-	
WORKER'S COMPENSATION INFORMATION	I – INZUKANCE CAKKI	tK <u>Not yet al</u>	otained—no employ	ees as of yet POLICY OR BINDER #: 180	
1. Applicant A Sam Chang	9(7-682-	7017			
(full name)	(telephon		Til	samchang@mcsamhotel.com E-mail (Required)	
8 Mansion Orive	Dld Westbury	NY	11568		
(residence)Street	City	State	Zip Code	(period of residency in Baltimore City)	
July 29, 1960	M	Taiwan			
(Month/Year of Birth)	(Sex: Male or Fem		1.00		
If applicable, address of Property on which t	ax is paid in your Individ	ual Harne: N/	<u>A</u>		
Chack: ☐ Yes ⊠ No Have you be				e for 2 years preceding this application?	
		,			
Z. Applicant B	449 0	24 0000		W. 14 A. 1672 A	
Ashley Rodriquez (full name)	443-3. (telephon	24-9883		ashley.rodriquezll@gmail.com E-mail ( <b>R e q u i r e d</b> )	
1512 Light Street		ore. MD	2(230	3-years	
(residence)Street	City	State	Zip Code	(period of residency in Baltimore City)	
February 22, 1983	. F		Baltimore, MD	* - >	
(Month/Year of Birth)	(Sex: Male or Fem	ale) (Place (	of Birth)		
If applicable, address of Property on which to	ax is paid in your individ	ual name:	_	=	
Check: 🗵 Yes 🗆 No Have you be	en a resident and ta	xpayer of th	e City of Deltimor	e for 2 years preceding this application?	
🖾 Yes 🗆 No Are you a re	gistered voter in th	e City of Bai	ltimore?		
71. 41k					
3. Applicant C					
(full name)	(telephon	end.)		E-mail (Required)	
(residence)Street	City	State	Zip Gode	(period of residency in Baltimore City)	
(Month/Year of Birth)	(Sex: Male or Fem	ale) (Place o	of Birth)		
If applicable, address of Property on which to	ax is paid in your individ	ual name: _		3.	
Check: 🗀 Yes 🗆 No Have you be	an a resident end ta	xpayer of th	e City of Baltimor	a for 2 years preceding this application?	

☐ Yes ☐ No Ara you a registered voter in the City of Baltin I. Has the applicant(s) been convicted of a felony, or has been adjudged guilty of violating the laws governing the sale of any alcoholic beverage or for gambling in any State, including Maryland? ☐ Yes ☒ No If yes, mark applicant and provide	nore? Applicant A 🖾	8 🗵	C
explanation in adjacent space provided.			
2. State whether the applicant(s) has ever been adjudged guilty of any offense against the laws of the State of Maryland or the United States.   Yes  No If yes, mark applicant and explain.	Applicant A 🗵	8 🗵	CO
7 Han she madismassing your hold a transaction she made of she half-	Applicant A 🖾	B⊠	C
3. Has the applicant(s) ever held a license for the sale of alcoholic beverages in the State of Maryland? ☑ Yes ☑ No If yes, explain.	Applicant A: in 1979 Gity, Applicant B: No.	a Chinese re	staurant in Baltimore
4. Has the applicant(s) ever had a liquor license suspended or revoked? ☐ Yes ☒ No If yes, explain in adjacent space.	Applicant A 🗵	8 🗵	C
		ii ii	
5. Ones the applicant(s) have a pecuniary interest in any other	Applicant A 🖾	B⊠	CO
alcoholic beverage business or business for which a license has been applied for, granted, and issued? 🖾 Yes 🖾 No If yes, explain in adjacent space.	Applicant A. Yes. Fin Applicant II, No.	ase see attac	Sed the information
6. Is your spouse or child a licensee, In this jurisdiction or any other, and does he or she have any financial interest in any other alcoholic beverage business? ☐ Yes ☒ No If yes, explain.	Applicant A 🖾	B 🗵	CO
7. Is there now, or will there be, during the continuance of the license applied for, any other person financial Interested in said license or business to be conducted thereunder? □ Yes ৷ No If yes, explain in the adjacent space provided.			
8. Is the licensed premises presently open and operating?  Solution Yes I No If no, please provide information requested in adjacent space provided.	Closurs Date:		
9. Do any of the applicant(s) have any indebtedness or other financial obligations to any manufacturer, brewer, distiller, or wholesaler at the time of making this application?  Yes No If Yes, please provide information as to the applicant(s) indebted, the amount of Indebtedness, and the name of the manufacturer, brewer, distiller, or wholesaler in the adjacent space provided.	Explanation:		

. Please list the following inform				
Name	Addres::	Phone		Ema'l
<u> </u>				
Applicants Applying as Business & Company/Partnerships list all autl	ntities - (Give name(s) and addresses - in C horized persons.)	Corporation list all officers (attac	th list if necessary) or in L	imited Liability
) NAME: <u>Sam Chang</u>	ADDRESS: 917-682-7913		er of Sambar, LLC_OF STO	ICK HELD RESIDENCE:
) NAME:	ADDRESS:	TITLE:	%OF STOCK HELD R	esidence:
) HAME:	ADDRESS:	TITLE:	%OF STOCK HELD RI	ESIDENCE:
) HAME:	ADDRESS:	TITLE:	%OF STOCK HELD RI	ESIDENCE:
****** Attached is a list of nan 5% of the outstanding rganization. *******	the names and addresses of all outs stock of the corporation and the	standing stockholders who articles of incorporation,	on the day of this app partnership agreem	lication own more ent or articles of
nau  va ucenieu gunty or pei	idavit or oath required under the projury. And upon indictment and convi	rovisions of this Act shall co iction thereof, shall be subj	ntain any faise staten iect to penalties provi	nents, the offender ded by Law for that
rnne. ERTIFICATE OF APPLICANTS: At le aryland for at least two years or	est one applicant whose signature appear	rs below certifies that he/she h	as been a resident and to	expayer of Baltimore City,
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McSam Baltimore	Hotel, LLC and			
under the Alcoholic Beverage Laws of authorized deputies, inspectors an any peace officer of the City of Baltin	EREBY CERTIFY. That (I am. we are) the c which is named in the prese. Maryland and assent to the granting of clerks, the Board of Liquor License Colore and State of Maryland, to inspect and business is to be	ent application made to Board of L of the license applied for, and hereb mmissioners of Baltimore City, its o nd search, without warrant, the ore	iquor License Commis: sy authorize the State C fully authorized anents	sioners of Baltimore lomptroller, his duly and employees, and
(Witness (my. our) hand(s) and seal(s	this day of A	UGUST in the year of a	015	
WITHESS: (A) STATE OF MARYEARD NEW YORK	<b>Q</b>			
	of the State of Maryland, personally app	r, 2015 peared SAM CHA	N &	
and acknowledge the execution of the	aforegging statutentite be		/	act.
Notary Public	Y PUBLIC-STATE OF NEW YORK No. 02WR4876961 addition in Nassau County	DIVII)	<u></u>	
The following certificates MYSFOR We, the undersigned citizens, re present application is to be con	amined by Explose 20, 2010 persons. 20, 2010 persons. 20, 2010 persons and registered ducted, certify that the qualifying and a resident of the State of Ma	voters in the City of Baltimor applicant(s) is/are personal	v known to us and l	ness covered by has been a reside
Names	Address	Signature	OOB (Month/Year)	Length of time Acquainted with the Applicant(s)
		hed		(1
	att	ac		
	See att			
	FOR OFFIC	E USE DNLY		
31.1	NSFER/EXPANSION - \$500.00 PAID: 53/	POSTING DATE 9315	Status of Approved: Yes ( Date: BLLC Initials:	Application
Board of Liquor License Commissi East Baltimore Street, 6 <sup>th</sup> Floor, 8 Phone: 410-396-4377 Fax: 410-35			Withdrawn: Yes Date: BLLC Initials:	□ Ko□

<sup>\*</sup>Please present/draw a Floor Plan/Rendering of the Licensed Premises here. If you have a professionally drafted rendering, please attach it to the application.\*

### <u>Hotel</u>

As of August 21, 2015

Risingsam Ditmars LLC Hilton NY JFK Airport 144-02 135<sup>th</sup> Avenue Jamaica, NY 11436

Sheesan Restaurant 26<sup>th</sup> LLC Prime Café 121-125 West 26<sup>th</sup> Street New York, NY 10001

SC Delancey LLC Holiday Inn 148 Delancey Street New York, NY

Brookville JFK Restaurant LLC 248-06 Rockaway Boulevard Rosedale, NY 11422

RS Hospitality of Marion LLC Hampton Inn 2710 West Deyoung Street Marion, IL 62959

Brisam Vernon LLC Hampton Inn 221 Potomac Boulevard Mt. Vernon, IL 62864

Brisam Anderson LLC Hampton Inn Anderson 2312 Hampton Drive Anderson, IN 46013

Brisam Court Indy LLC Courtyard by Marriott – Indianapolis 4650 Southport Crossing Drive Indianapolis, IN 46237

SC Joplin 32 LLC Hilton Garden Inn of Joplin 2644 E. 32<sup>nd</sup> Street Joplin, MO 64804 SMG Hotel LLC & Amazon Restaurant & Bar Inc St. George Tavern 103 Washington Avenue New York, NY 10006

Golden Seahorse LLC and Crescent Hotels & Reports Holiday Inn Manhattan-Financial District 99 Washington Street New York, NY 10006

Grandsam Island LLC Byblos Niagara Resort and Spa 100 Whitehaven Road Grand Island, NY 14072

conducted, at any an	d all hours.			
(Witness (my, our) ha	and(s) and seal(s) this			ear of
	•	. 4		
WITNESS.		Perious		
STATE OF MARYLAN	D	Cle 3,		
THIS CERTIFIES, THAT		, Y		
	a notary public of the State of M			
and acknowledge the	e execution of the aforegoing stat	ement to be		act
(Witness my hand an				
Notary Public	•			
Baltimore in which certify that the qu	ned citizens, real estate owner the business covered by the alifying applicant(s) is/are pe altimore City and a resident of	e present application ersonally known to us	is to be condu and has been	cted, a resident
Names	Address	Signature	DOB	Length of
			(Month/Year)	time
4				Acquainted
Michael				with the
	142 8 00 60 100	10001		Applicant(s
Michael Eckearch	e Balt diady	Mobilel	8-16-70_	-10
John A. Poznike III	2 W Heath St Bolt 7150-	X4MA	17-7-2-76	-8
	1627 PATAPSOS	Addies Eto.	1-41-122	- V
CHULLET 15201	AL BALTIMORE, HD 24	555 V Sku	, 4/15/12	
				-
	FOR OFF	FICE USE ONLY		
DATE FILED: GHI	NEW/TRANSFER/EXPANSION		Status of App Approved: Yes Date: BLLC Initials:	□ No
		7		

10. Please list the following, if applicable, in the spaces provided below:

2) NAME:

HELD RESIDENCE:

Purchase Price of Business	Owner of the Real Property	Cost of the Real Property	Cost of the Business	Cost of the Personal Property	Down Payment provided to seller	Terms for the Balance due
	McSam Baltimore Hotel, LLC	\$15,000,000.00			\$2,000,000.00 deposit in escrow	Entirety of 15,000,000 to be paid at closing

11. Please list the following information for the Manager of the establishment to be licensed:

Name	Address	Phone	Email
TBD		114	

Applicants Applying as Business Entities - (Give name(s) and addresses - in Corporation list all officers (attach list if necessary) or in Limited Liability Company/Partnerships list all authorized persons.)

1) IVAME: Sam Chand	ADDRESS:	917-682-7913	TITLE: 100% owner of
Sambar, LLC_OF STOCK HELD RESI	DENCE;		

ADDRESS:

3) NAME:	ADDRESS:	TITLE:	%OF STOCK
HELD RESIDENCE			_

%OF STOCK

4) NAME:	ADDRESS:	TITLE:	%OF STOCK
HELD RESIDENCE:			

\*\*\*\*\*\*\*Attached is a list of the names and addresses of all outstanding stockholders who on the day of this application own more than 5% of the outstanding stock of the corporation and the articles of incorporation, partnership agreement or articles of organization.\*\*\*\*\*\*\*

\*Extract from Law: If any affidavit or oath required under the provisions of this Act shall contain any false statements, the offender shall be deemed guilty of perjury. And upon indictment and conviction thereof, shall be subject to penalties provided by Law for that crime.

CERTIFICATE OF APPLICANTS: At least one applicant whose signature appears below certifies that he/she has been a resident and taxpayer of Baltimore City, Maryland for at least two years preceding the filing of this application. Each of said applicants hereby certifies further that if the license applied for is granted, he/she will conform to all State and County laws and regulations relating to the sale of alcoholic beverages, as well as to the rules and regulations of the Board of License Commissioners for Baltimore City, and herby grants permission to the State Comptroller, his duly authorized deputies, inspectors and cierks, The Board of License Commissioners for Baltimore City, its duly authorized agents and employees, and any peace officer of Baltimore City or the State of Maryland to inspect and search at any and all hours, without warrant, the premises and any and all parts thereof upon and in which said business is to be conducted.

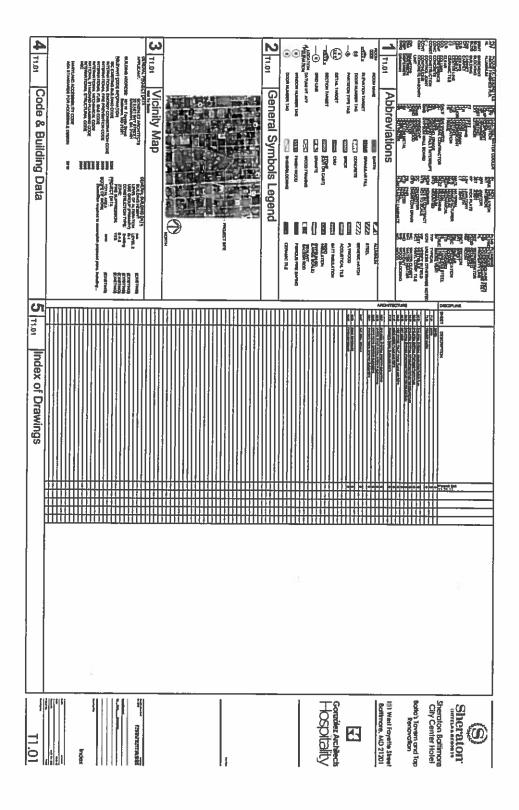
	ashlu Rodun	
Signature of Applicant A	Signature of Applicant B	Signature of
Applicant C		14
State of Maryland: Baltimore City THIS CERTIFIES, THAT ON THE 190F before the subscriber a notary public of the	ss August ne Stole of Maryland, personally appeared	2015
The applicant (s) names in the aforegoing	application, and made oath in due form	of law that the statement
therein are true to the best of (his, her, t	heir) knowledge and belief.  Notary Public	á.
(Witness my hand and seal) (Witness my hand and seal)		*
Name and Address of the owners of the	Premise/landlord: McSam Balhma	e Hotel, LLC and Sam Chang
Phone Number: <u>516 -773 - 9300</u>	420 Great Neck Great Neck, N	Road
STATEMENT OF OWNER OF F	PEMISES PEOLITIPED IN CONNECTION I	MITL

STATEMENT OF OWNER OF PREMISES REQUIRED IN CONNECTION WITH

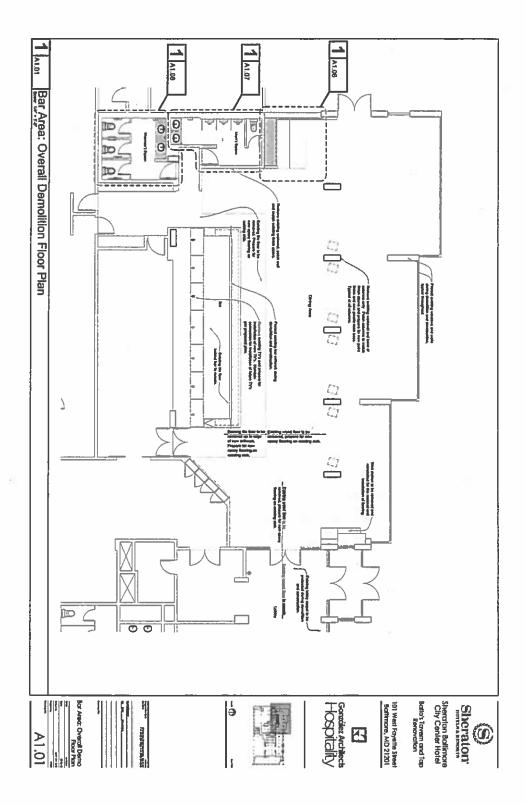
ALCOHOLIC BEVERAGES LAW OF

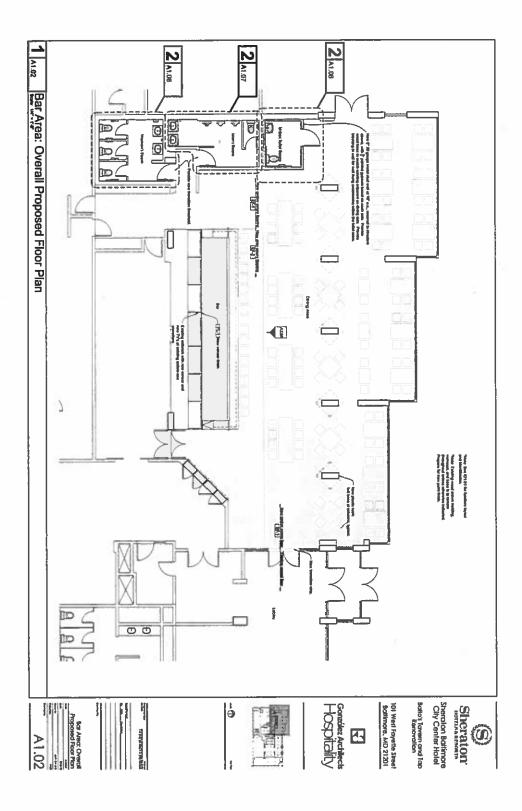
MARYLAND

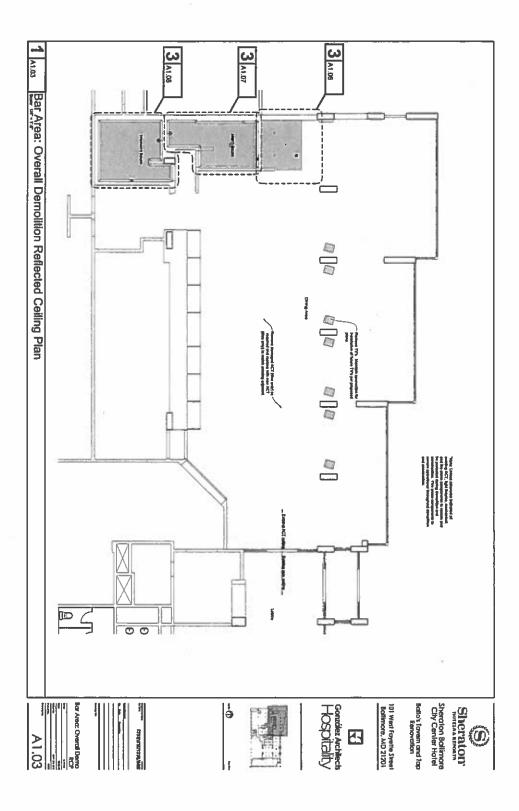
(I. WE) Lesson boffines. HEREBY CERTIFY. That (I am, we are) the owner(s) of the property located at 101 w. Fayette Street Baltimore, City with a Zip Code of 21201 which is named in the present application made to Board of Liquor License Commissioners of Baltimore City under the Alcoholic Beverage Laws of Maryland and assent to the granting of the license applied for, and hereby authorize the State Comptroller, his duly authorized deputies, inspectors and clerks, the Board of Liquor License Commissioners of Baltimore City, its duly authorized agents and employees, and any peace officer of the City of Baltimore and State of Maryland, to inspect and search, without warrant, the premises upon which the business is to be conducted, and any and all parts of the building in which said business is to be

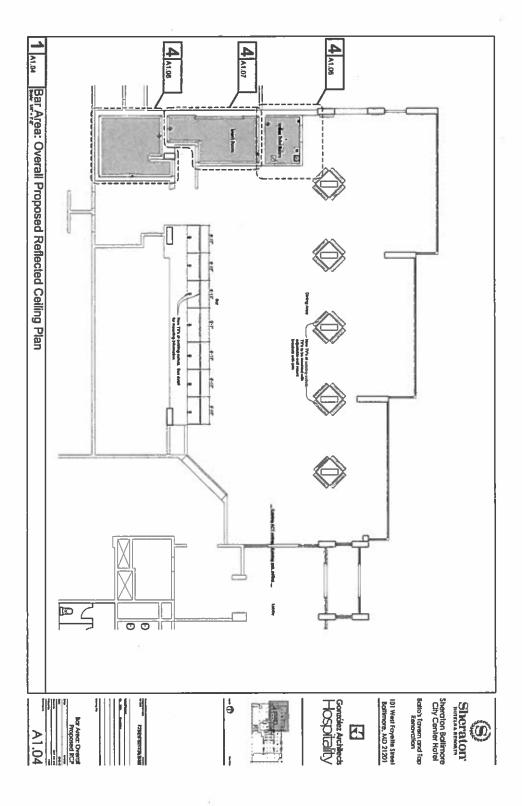


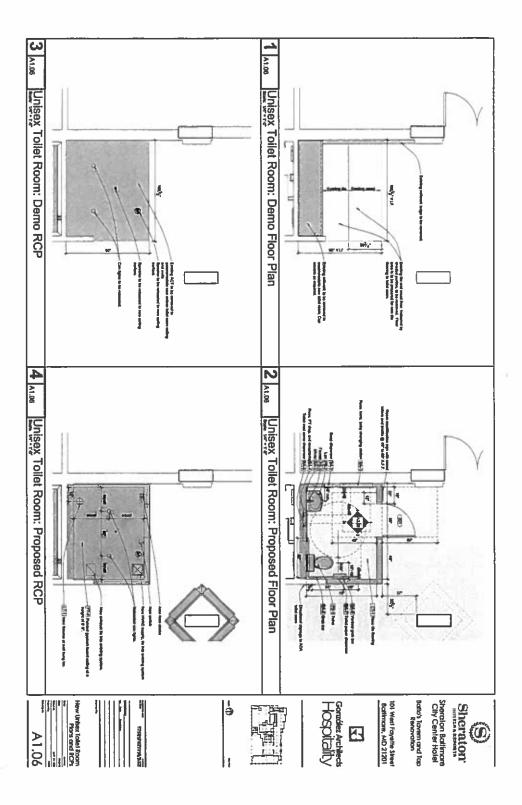
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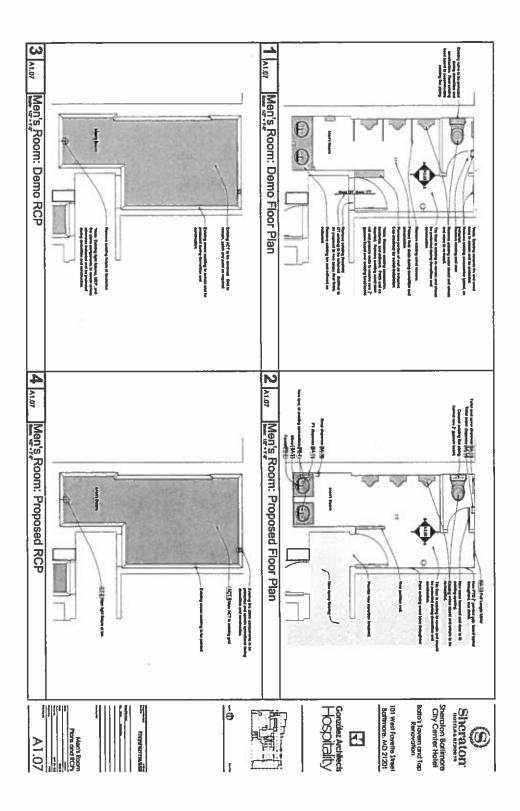


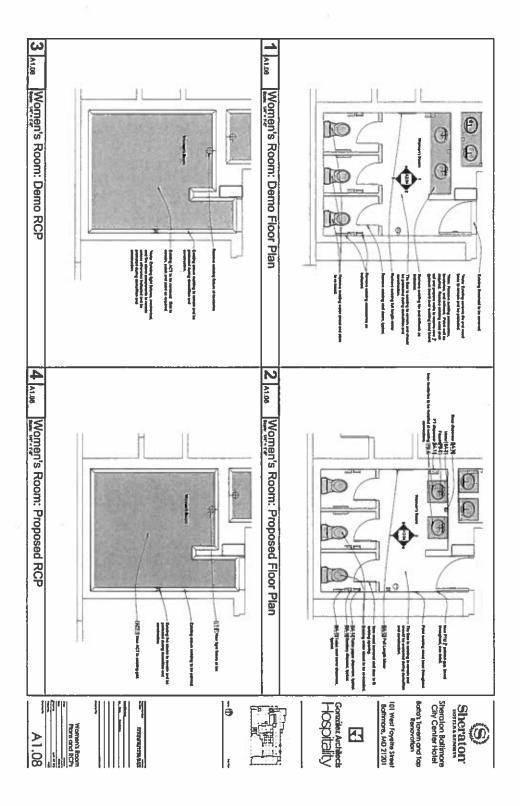


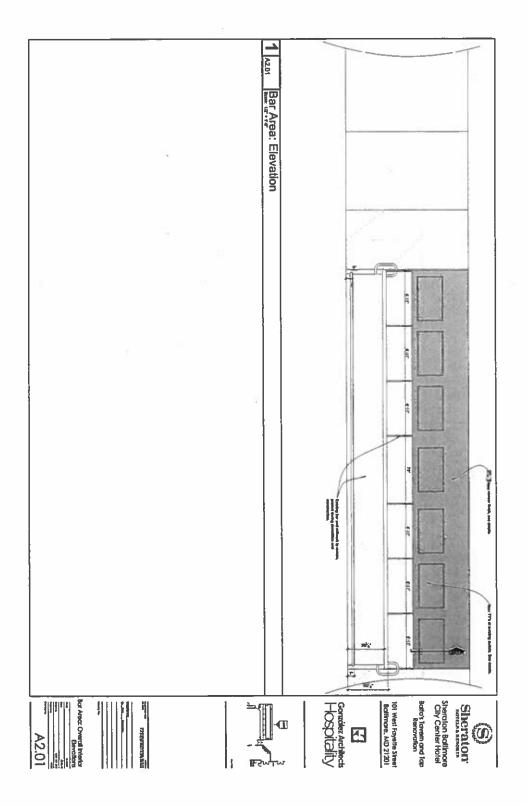


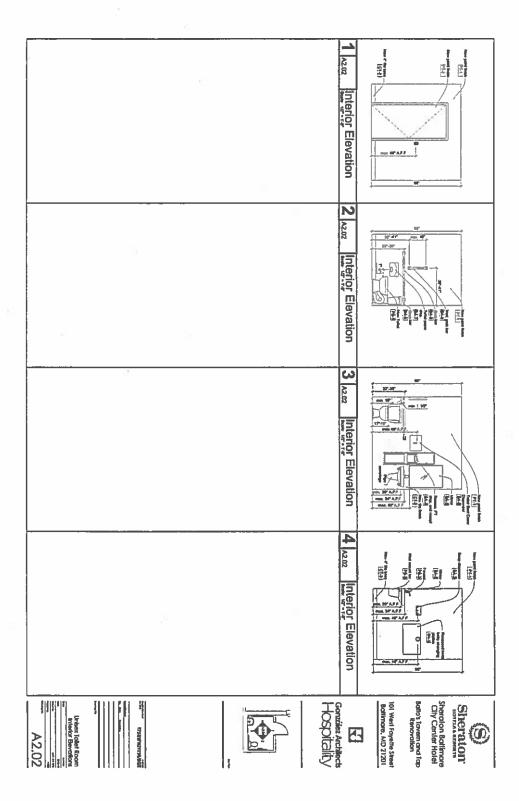


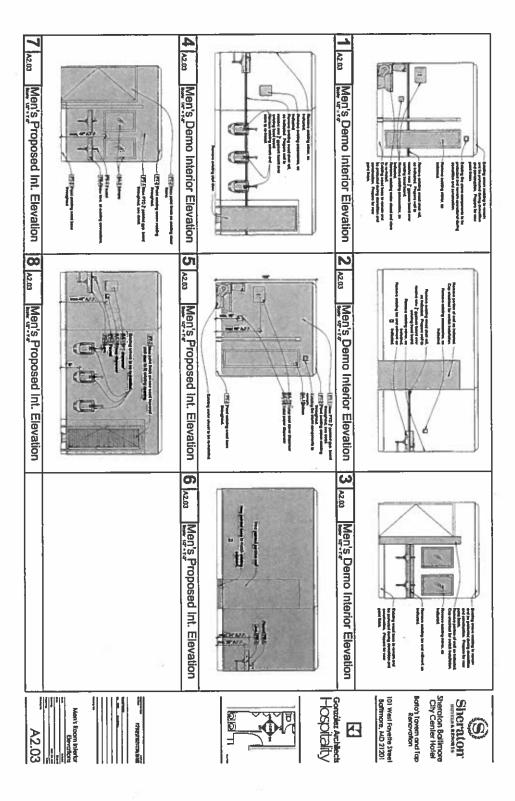


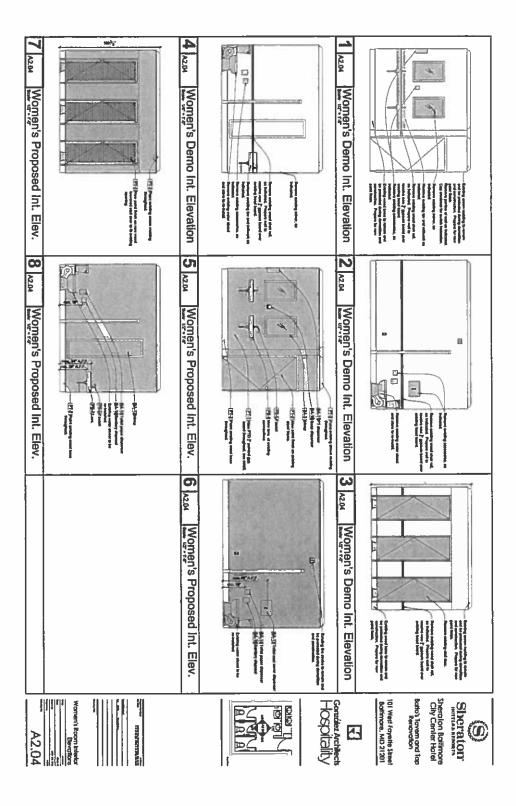


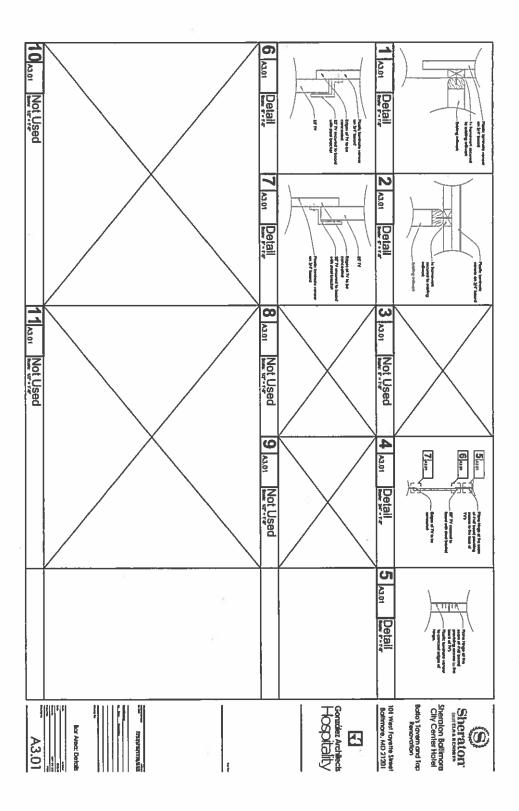






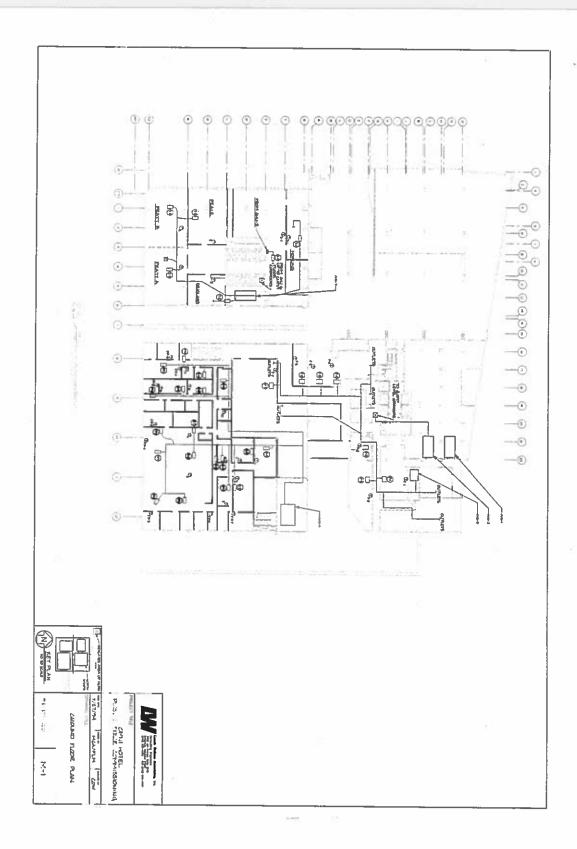


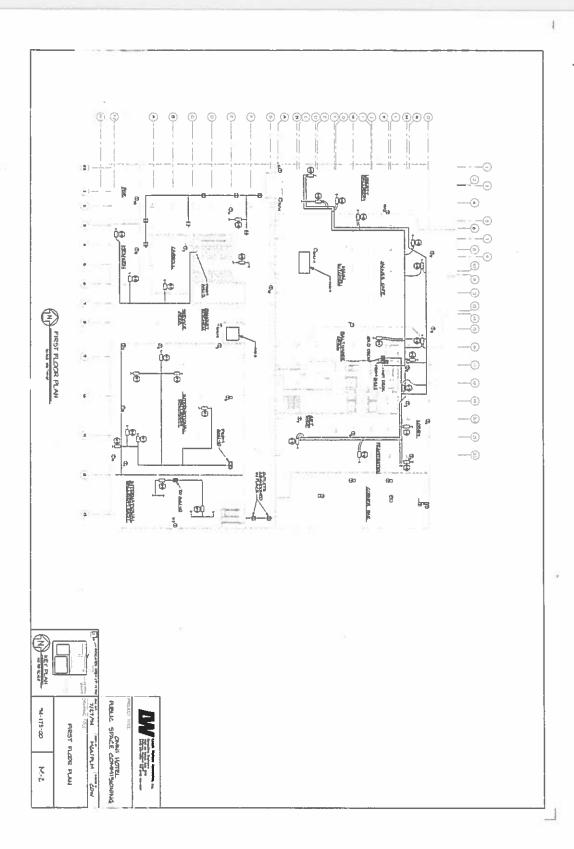


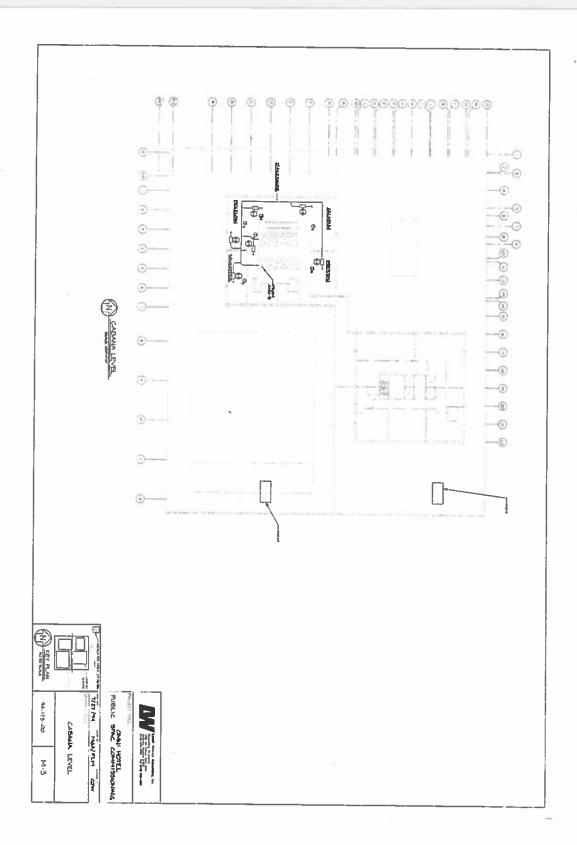


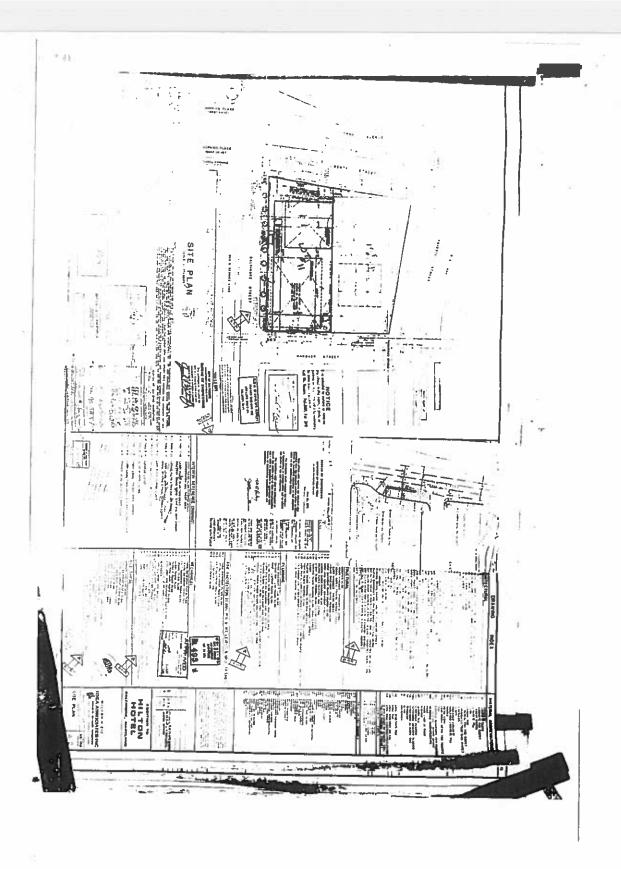
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Door Types/Schedden		Goraties Architects Hospitality	Batto's Tayern and Tap Renavolion 101 West Fayerts Street Bahimore, MD 21201	Sheraton Sheraton Bollimore City Center Hotel

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### **Liquor Board System**

Version 1.0

Annual-Renewal ▼ | License-Transfer ▼ | One-Day ▼ | Add New License ▼ | Query ▼ | Help ▼

### **License Detail**

Close the License

Print License

Print Renewal Letter

<< Go Back

License Info

License Num; LBHM 025

Cert Num; 1199

Fee: \$6,700.00 Status: Renewed

License Date:5/1/2015

License Year: 2015

CR Number: 14530999

Payment Date: 04-29-15

2014 - 2015 TPP Paid 🛄

2015 Trader's License 🗌

Update Info

Click to Start License Renewal

### **Add Adult Entertainment License**

Add New Adult Entertainement License

### Location

Corp Name: CROSSROADS HOSPITALITY MNGMT CO, LLC

Trade Name: SHERATON BALTIMORE CITY CENTER

Zone Code: 27

Phone: 410-752-1100

Block Num: 101

City: BALTIMORE

Street: FAYETTE STREET WEST

State: MD

Zip: 21201

CR Number: 14530999

Portion of Business Used:

ENTIRE BUILDING FOR BUSINESS WITH OUTDOOR TABLE SERVICE

LICENSEE MAY PROVIDE WINE CORKAGE

Edit the License Location Info Alternate Mailing Address

### **License Owners**

First Name	Last Name	Street	City	State	Zip	Action	Change Owner
BRIAN E.	CARTER	734 N, LINWOOD AVENUE	BALTIMORE	MD	21205	Edit	Remove Owner
ERICA HILARY	HAGEMAN	9100 WEXFORD DRIVE	VIENNA	VA	22182	Edit	Remove Owner

Comments

Date	Comment	Action
06/20/2011	6/16/11 Public Hearing re: Transfer of ownership & request for outdooor table service. TRANSFER ONLY APPROVED.	Delete
05/18/2011	5/11 Transfer of ownership & request for outdoor table service, B-BWL restaurant License (Hotel/Motel), Patricia Jones, Christopher Bennett, Crossroads Hospitality Management Company, LLC	Delete

Print History (Print Card)

License num: LBHM 025

Address: 101 FAYETTE STREET WEST

Trade Name: SHERATON BALTIMORE CITY CENTER

Comment:

Add Comment

**Hold Info** 



### Transfer of Ownership - BD7 and Adult Entertainment

Applicant(s):

Vincent Tolson & Joseph Arizzi

Desire, LLC T/a Desire

3821-23 Pulaski Highway

Class "BD7" Beer, Wine & Liquor License/Adult Entertainment

Application to transfer ownership

### Board's Information:

Attached is a copy of the application, interview form and map.

Community Letter(s)/ Memorandum of Understanding: None as of file date

Last Inspection Date: September 3, 2015 posting date

SDAT: In Good Standing (Active)

**BOARD'S DECISION:** 

Maryland Department of Assessments and Taxation Business Services (w4)

Search Help

Entity Name: DESIRE, LLC

Department ID: W16731317

General Information

**Amendments** 

**Personal Property** 

**Certificate of Status** 

### Principal Office (Current):

23 BEYDA COURT BALTIMORE, MD 21230

### Resident Agent (Current):

SHAWN PRESSLEY 23 BEYDA COURT BALTIMORE, MD 21230

Status:

**ACTIVE** 

Good Standing:

Yes

What does it mean when a business is not in good standing or forfeited?

Business Code:

Other

Date of Formation or Registration:

08/28/2015

State of Formation:

MD

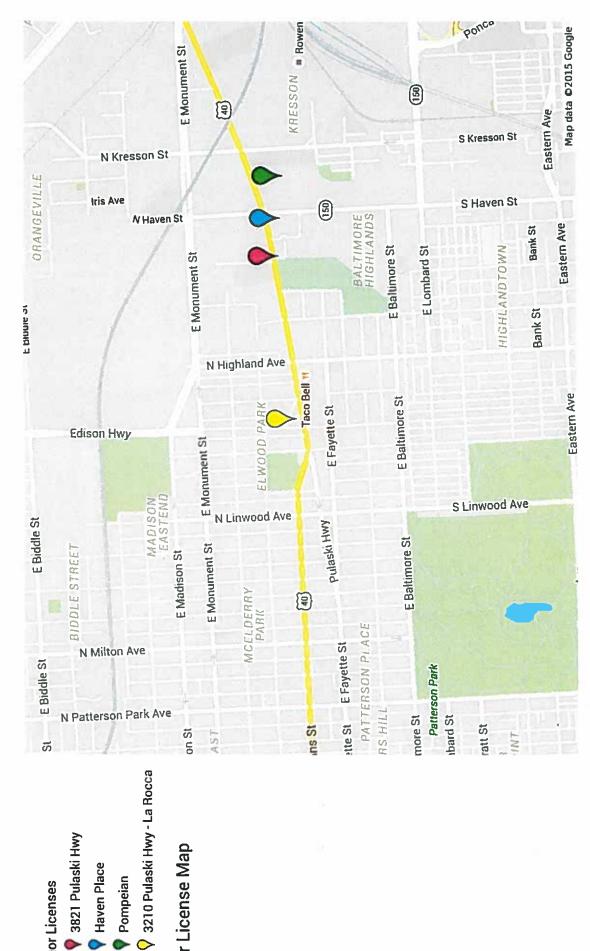
Stock/Nonstock:

N/A

Close/Not Close:

Unknown

# 3821-23 Pulaski Hwy - Desire



Liquor License Map

Haven Place Pompeian

Liquor Licenses

### Application for Alcoholic Beverages License Board of Liquor License Commissioners for Baltimore City

CLASS TYPE BD7 LICENSE AT THE LOCATION: 3821 -23 PULDSKI PWY IF TRANSER, LOCATION: SAME	
CORPORATE/LLC/LLP/PARTNERSHIP NAME: DESIRE, LLC TRADE NAME: DESIRE	
ATTORNEY FOR THE APPLICANT:  ADDRESS: STE 732 PHONE(410) EMAIL: PREVASAND PREVA	338
BOLTO, MD-7/702 752-2340 VERITONI. NE	76
INDICATE TYPE OF LICENSE APPLICATION: TRANSFER 🛛 NEW 🗆 EXPANSION OF PREMISES 🗆 SUBSTITUTE 🗆 AMENDMENT(S) 🗖	
Describe Part of Premises to be Used: 157 FL OR +BASS TO FEW Will you offer delivery of food and/or alcohol? \(\sigma\) Yes \(\sigma\) No	
Will Live Entertainment be provided?    Yes □ No What Kind?   ADULY CY TERTAINMENT	
Will Outdoor Table Service Be Provided? 🗀 Yes 🗷 No  Off Premise Catering of Food and Alcohol? 🗅 Yes 💢 No	
Please note that as per Art. 28 §10-202(a)(Iv)(1) that an application for the issuance or transfer is not complete unless the applicant has	
obtained zoning approval from the City of Baltimore Do you have a Zoning Approval DHCO? 💢 Yes 🔲 No If yes, please attach. If no, please give	
timeframe for obtaining letter of approval: FXISTING USE PERMIT - CHANCE OF OWNERSHIP WILL BE FILED	
WORKER'S COMPENSATION INFORMATION - INSURANCE CARRIER POLICY OR BINDER #:	
1. Applicant A VINCENT CHARLES TOLSON (516) 784-3714 VTOLSON 3/10 GMAIL -COM  (full name) (telephone no) E-mail (Required)  6707 AVLUTH AUT BALT MO: 2/222 12745  (residence) Street City State Zip Code (period of residency in Baltimore City)  MAF BALTO MO  (Month/Year of Birth)  (Sex Male or Female) (Place of Birth)	
If applicable, address of Property on which tax is paid in your individual name:	
Check: 🔲 Yes 🗆 No Have you been a resident and taxpayer of the City of Baltimore for 2 years preceding this application?	
☑. Yes □ No Are you a registered voter in the City of Baltimore?	
2. Applicant B  JOSEPH AGATICO ARIZZI (443) 915 -2548 JANIZZI 30 GMAIL. Co  (full name) (telephone no.) APT 433 E-mail (Required)  8117 EVENING STAR ON PASADONA MA Z/177  (residence) Street City State Zip Code (period of residency in Baltimore City)  7/1/ 70 MALE BALTO MO.  (Month/Year of Birth) (Sex: Male or Female) (Place of Birth)	) h
If applicable, address of Property on which tax is paid in your individual name:	
Check: Yes 🔼 No Have you been a resident and taxpayer of the City of Baltimore for 2 years preceding this application?  Yes 🔼 No Are you a registered voter in the City of Baltimore?	
3. Applicant C	
(full name) (telephoneno.) E-mail (Required)	
(residence)Street City State Zip Gode (period of residency in Baltimore City)	
(Month/Year of Birth) (Sex: Male or Female) (Place of Birth)	
If applicable, address of Property on which tax is paid in your individual name:	
Check: Yes No Have you been a resident and taxpayer of the City of Baltimore for 2 years preceding this application?	

l. Has the applicant(s) been convicted of a felony, or has been adjudged guilty of violating the laws-governing the sale of any	Applicant A 🗆	B□	C 🗆	# 0 s
alcoholic beverage or for gambling in any State, including Maryland?				
	Applicant A 🗆	8 🗅	C $\square$	
2. State whether the applicant(s) has ever been adjudged guilty of any offense against the laws of the State of Maryland or the United States.   Yes No If yes, mark applicant and explain.	17 <b>2</b> 80 5	<b>-</b> 201	No.	
3. Has the applicant(s) ever held a license for the sale of alcoholic	Applicant A 🗆	В	C 🗆	
beverages in the State of Maryland?  Yes Ø No If yes, explain.	1.5			
4. Has the applicant(s) ever had a liquor license suspended or revoked? ☐ Yes ☒ No If yes, explain in adjacent space.	Applicant A 🗆	8 🗇	C 🗆	
5. Does the applicant(s) have a pecuniary interest in any other alcoholic beverage business or business for which a license has	Applicant A 🗆	В□	C	
been applied for, granted, and issued? 🗆 Yes 💢 No If yes, explain in adjacent space.				2
6. Is your spouse or child a licensee, in this jurisdiction or any other, and does he or she have any financial interest in any other alcoholic beverage business?   Yes  No If yes, explain.	Applicant A 🗆	B 🗆	€ 🗆	
				Se Se
7. Is there now, or will there be, during the continuance of the license applied for, any other person financial interested in said license or business to be conducted thereunder? ☒ Yes ☐ No If yes, explain in the adjacent space provided.	CARVILLE	NoLL	IN GS V	n RTH
8. Is the licensed premises presently open and operating?  ☑ Yes ☐ No If no, please provide information requested in adjacent space provided.	Closure Date:			
	Explanation:			
9. Do any of the applicant(s) have any indebtedness or other financial obligations to any manufacturer, brewer, distiller, or wholesaler at the time of making this application?  — Yes   No If Yes, please provide information as to the applicant(s) indebted, the amount of indebtedness, and the name of the manufacturer, brewer, distiller, or wholesaler in the adjacent space provided.				

10. Please list the following, if applicable, in the spaces provided below: Purchase Price of Owner of the Real Cost of the Real Cast of the Cost of the Down Payment Terms for the Business Property Property Business Personal provided to seller Balance due Property 50001.60 300,000.60 50,000.00 521,000,40 TB! PARTNERSULF 11. Please list the following information for the Manager of the establishment to be licensed: Hame Address Email Phone Applicants Applying as Business Entities - (Give name(s) and addresses - in Corporation list all officers (attach list if necessary) or in Limited Liability Company/Partnerships list all authorized persons.) 1) NAME: VINCONT TOLSON ADDRESS: 6707 OVLVTH AVE BALFIND - 21222 %OF STOCK HELD RESIDENCE MEMBEN 2) NAME: TOSEPH ARIZZI ADDRESS: SIIT EVENING STONDHITTLE: 33\$

APT 433 PASADON PRIZZ

3) NAME: CARVILLE POLLINGS ADDRESS: 3722 PARKHURS TO THE 33\$

BAUTI, MD. 2/236 %OF STOCK HELD RESIDENCE MG MB 817 %OF STOCK HELD RESIDENCE: MEMBER ADDRESS: TITLE \_%OF STOCK HELD RESIDENCE: \*\*\*\*\*\*\*Attached is a list of the names and addresses of all outstanding stockholders who on the day of this application own more than 5% of the outstanding stock of the corporation and the articles of incorporation, partnership agreement or articles of organization.\*\*\*\*\* \*Extract from Law: If any affidavit or oath required under the provisions of this Act shall contain any false statements, the offender shall be deemed quilty of perjury. And upon indictment and conviction thereof, shall be subject to penalties provided by Law for that crime. CERTIFICATE OF APPLICANTS: At least one applicant whose signature appears below certifies that he/she has been a resident and taxpayer of Baltimore City. Maryland for at least two years preceding the filing of this application. Each of said applicants hereby certifies further that if the license applied for is granted, he/she will conform to all State and County laws and regulations relating to the sale of alcoholic beverages, as well as to the rules and regulations of the Board of License Commissioners for Baltimore City, and herby grants permission to the State Comptroller, his duly authorized deputies, inspectors and clerks, The Board of License Commissioners for Baltimore City, its duly authorized agents and employees, and any peace officer of Baltimore City or the State of Maryland to Inspect and search at any and all hours, without warrant, the premises and any and all parts thereof upon and in which said business is to be conducted. Signature of Applicant C State of Maryland <u>C/</u> before the subscriber a notary public of the State of Maryland, personally appeared VINCENT TOISON & Hrizzi The applicant (s) names in the aforegoing application, and made oath in due form of law that the statement therein are true to the best of (his, her, their) knowledge and belief. Notary Public Jennifer L. martin (Witness my hand and seal). NOTARY

3

Board of Liquor License Commissioners For the City of Baltimore, 231

East Baltimore Street, 6th Floor, Baltimore, Maryland 21202

Phone: 410-396-4377 Fax: 410-396-4382

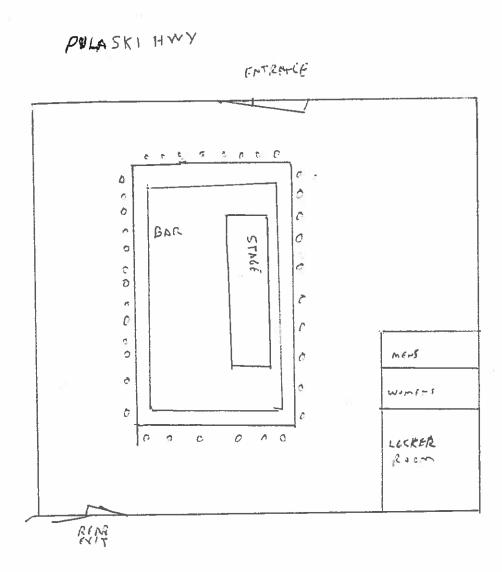
**BLLC** Initials:

**BLLC** Initials:

Date:

Withdrawn: Yes 🗆 No 🗖

\*Please present/draw a Floor Plan/Rendering of the Licensed Premises here. If you have a professionally drafted rendering, please attach it to the application.\*





### **Liquor Board System**

Version 1.0

| License-Transfer → | One-Day → | Add New License → | Query → | Help →

### **License Detail**

Close the License

**Print License** 

Print Renewal Letter

<< Go Back

License Info

License Num: LBD7 439

Cerl Num: 1255

Fee: \$1,320.00 Status: Renewed

License Date:5/1/2015

License Year: 2015

CR Number: 00162755

Payment Date: 05-15-15

2014 - 2015 TPP Paid

2015 Trader's License 🔲

Update Info

Click to Start License Renewal

### **Adult Entertainment License**

Print Adult Entertainement License

License Info

License Num: AE 017

Cerl Num: 1288 License Year: 2015 Fee: \$1,000.00 Status: Renewed

License Date:7/1/2015

CR Number: 00162755

Payment Date: 06-25-15

Click to Start Adult Entertainment License Renewal

### Adult Entertainment License Owners

### **License Owners**

First Name	Last Name	Street	City	State	Zip	Action	Change Owner
GEORGE J.	ZAGANAS	3821 PULASKI HIGHWAY	BALTIMORE	MD	21224	Edit	Remove Owner

### **Add New Adult Entertainment License Owner**

First Name:

Last Name:

Street:

City: Baltimore

State: MD

Zip:

Add Owner

### Location

Corp Name: SHERRIE'S SHOW BAR, INC. Trade Name: SHERRIE'S SHOW BAR

Zone Code: 11

Phone: 410-675-1951

Block Num: 3821-23

City: BALTIMORE

Street: PULASKI HIGHWAY

State: MD

Zip: 21224

CR Number: 00162755

Portion of Business Used:

LICENSED PREMISES INLUDES 3821-23 PULASKI HIGHWAY & REAR OF 3825; 1ST FL, 3821-23

& REAR OF 3825 FOR BUSINESS-BASEMENT FOR STORAGE

Restriction:

SANDRA THOMAS, RAYMOND HUMIEMEY, GARY VAUGHN, NELL BOOTH, JOYCE KORANDA, & THOMAS SIGLER BARRED FROM THE PREMISES IN ANY CAPACITY.

Edit the License Location Info

Alternate Mailing Address

### **License Owners**

First Name	Last Name	Street	City	State	Zip	Action	Change Owner
GEORGE J.	ZAGANAS	3821 PULASKI HIGHWAY	BALTIMORE	MD	21224	Edit	Remove Owner

### Comments

Date	Comment	Action
05/15/2015	PAID FINE OF \$625.00 FOR HEARING DATED ON 09/04/14, INVOICE #94872	Delete
02/24/2015	9/4/2014 Public Hearing re: Violation of Rule 4.17(a) GUILTY \$500 Fine + \$125 admin fee \$625 Total (10 days to pay)	Delete
11/17/2014	8/7/2014 Public Hearing re: Violation of Rule 4.17(a) POSTPONED	Delete
07/30/2014	07/24/2014 Public Hearing re: Violation of Rule 4.17(a) (re: Dec 11, 2013 dancer solicited police officer for sexual intercourse) Request from licensee due to another conflict case in court. This will be rescheduled for Aug 7,2014)	Delete
08/12/2008	06/05/08 \$100 CONF.FEE PAID #64172	Delete
08/12/2008	05/22/08Transfer Conf.re: request for hardship extension.DECISION: EXTENSION GRANTED UNTIL 12/17/08 (360 DAYS). MUST PAY CONF.FEE \$100.	Delete

Print History (Print Card)

License num: LBD7 439

Address: 3821-23 PULASKI HIGHWAY

Trade Name: SHERRIE'S SHOW BAR

Comment:

**Add Comment** 

**Hold Info** 



### **New Application:**

Applicant(s)

Binod Uprety & Gopal Bishwakarma

Maya, Inc. T/a Namaste Baltimore

413 W. Coldspring Lane

New Class "B" Beer, Wine & Liquor License

Application for a new Class "B" Beer, Wine & Liquor restaurant license under the provisions of Rule 2.08 requiring \$200,000 in capital investment in restaurant fixtures and facilities and seating capacity for a minimum of 75 people, request for outdoor table service, and off-premises catering

### **Board's Information:**

Attached are copies of the application, map, and menu.

Last Inspection Date(s): Not Applicable (new)

SDAT: In Good Standing (Active)

**BOARD'S DECISION:** 

### Maryland Department of Assessments and Taxation Business Services (w4) Search Help Entity Name: MAYA, INC. Department ID: D16562852 General Information Amendments **Personal Property Certificate of Status** Principal Office (Current): 411-413 W. COLD SPRING LANE BALTIMORE, MD 21210 Resident Agent (Current): BINOD UPRETY 332 STEVENSON LANE APT B5 **TOWSON, MD 21204** Status: INCORPORATED Good Standing: What does it mean when a business is not in good standing or forfeited? Business Code: Ordinary Business - Stock 06/03/2015 Date of Formation or Registration: State of Formation: MD Stock/Nonstock: Stock Close/Not Close: Close

# 401 West Cold Spring Lane - Namaste

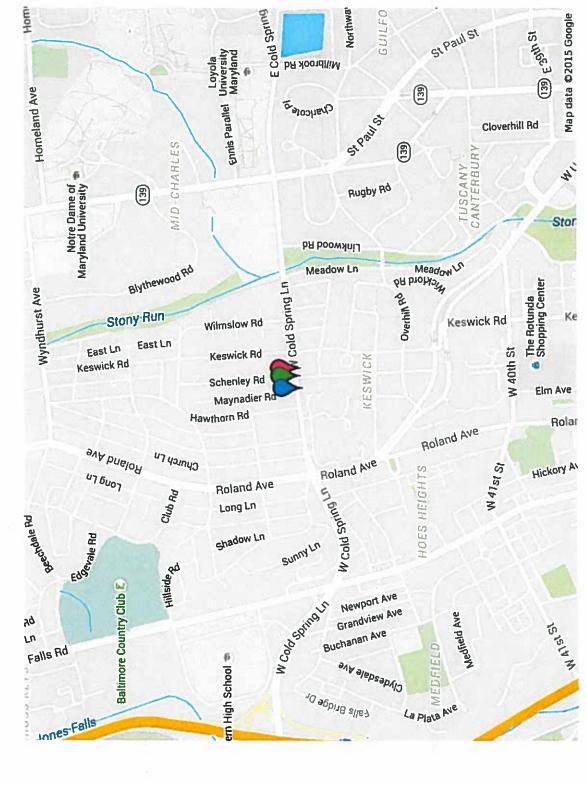
413 W Cold Spring Ln

Miss Shirley's Cafe

Alonso's

Liquor License Map

Licensed Establishments



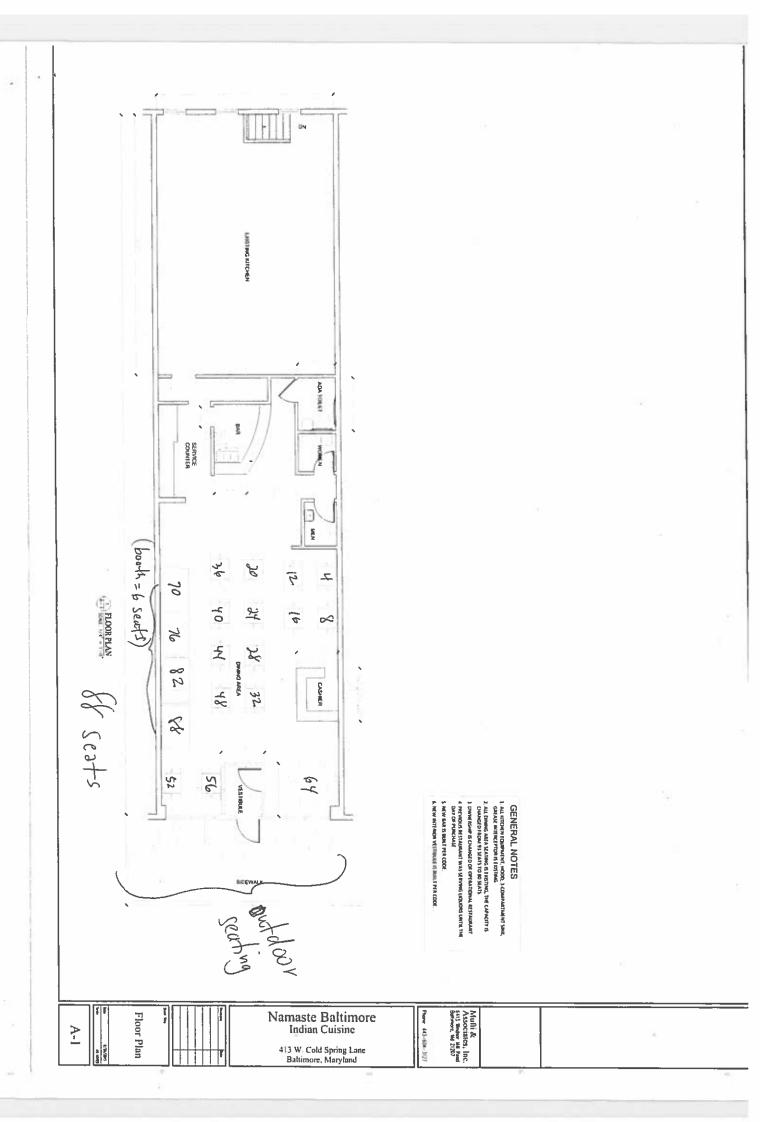
### Application for Alcoholic Beverages License

New Board of Liquor License Commissioners for Baltimore City
CLASS TYPE B LICENSE AT THE LOCATION 413 W. Coldspring take  CORPORATE/LLC/LLP/PARTNERSHIP NAME: Maya Inc. TRADE NAME Namaste Baltim  ATTORNEY FOR THE APPLICANT: Melvin J. ADDRESS 19. E. Fayette Phone 4 1068 5-5100 EMAIL 410 685-  Kodenski Je. 400
INDICATE TYPE OF LICENSE APPLICATION: TRANSFER  NEW EXPANSION OF PREMISES SUBSTITUTE AMENDMENT(S) Concernible Part of Premises to be Used: St Floor for by Sinc Will you offer delivery of food and/or alcohol? Wes No Will Live Entertainment be provided? Yes No What Kind?  Will Outdoor Table Service 8e Provided? Pres No Off Premise Catering of Food and Alcohol? Yes No
Please note that as per Art. 28 §10-202(a)(iv)(i) that an application for the issuance or transfer is not complete unless the applicant has obtained zoning approval from the City of Baltimore Do you have a Zoning Approval OHCO? Yes No If yes, please attach. If no, please give timeframe for obtaining letter of approval:
WORKER'S COMPENSATION INFORMATION - INSURANCE CARRIER  I. Applicant A Sonod Up rety  (full name)  Stevenson Lane Apt B5 Towson mo 21204 W/A  (residence) Street  Of 10 72  (Month/Year of Birth)  (Sex: Male or Female) (Place of Birth)  If applicable, address of Property on which tax is paid in your individual name:  Check: Yes No Are you a registered voter in the City of Baltimore?  2. Applicant B  Gonod Street  (residence) Street  (Sex: Male or Female) (Place of Birth)  (Sex: Male or Female) (Place of Baltimore for 2 years preceding this application?  (Yes No Are you a registered voter in the City of Baltimore?
(residence Street Off 2467 Willy State Zip Code (period of residency in Baltimore City)  (Month/Year of Birth) (Sex: Male or Female) (Place of Birth)  (Flace of Birth) (Sex: Male or Female) (Place of Birth)  (Sex: Male or Female) (Place of Birth)
3. Applicant C (full name) (talcabases)
(residence) Street (residence) E-mail (Required)  (residence) Street City State Zip Code (period of residency in Baltimore City)
(Month/Year of Birth) (Sex: Male or Female) (Place of Birth)
If applicable, address of Property on which tax is paid in your individual name:  Check: Yes No Have you been a resident and taxpayer of the City of Baltimore for 2 years preceding this application?  Yes No Are you a registered voter in the City of Baltimore?

I. Has the applicant(s) been convicted of a felony, or has been adjudged guilty of violating the laws governing the sale of any	Applicant A 🗖 B 🗆 C 🗆
alcoholic beverage or for gambling in any Stete, including Maryland? Tes Who If yes, mark applicant and provide explanation in adjacent space provided.	
2. State whether the applicant(s) has ever been adjudged guilty of any offense against the laws of the State of Maryland or the	Applicant A 🗆 B 🗆 C 🗆
United States. Yes No If yes, mark applicant and explain.	
3. Has the applicant(s) ever held a license for the sole of elcoholic beverages in the State of Maryland?   Yes No If yes, explain.	Applicant A 🗹 🛭 🖸 🖸
4. Has the applicant(s) over had a liquor license suspended or revoked?   Yes No If yes, explain in adjacent space.	Applicant A 🗆 🛭 B 🗀 C 🗀
5. Ooes the applicant(s) have a pecuniary interest in any other alcoholic beverage business or business for which plicense has	Applicant A 🗆 B 🗆 C 🗀
been applied for, granted, and issued? The Molf yes, explain in adjacent space.	
6. Is your spouse or child a licensee, in this jurisdiction or any other, and does he or she have any financial interest in any other alcoholic beverage business?   Yes No If yes, explain.	Applicant A 🗹 8 🗆 C 🗆
7. Is there now, or will there be, during the continuance of the license applied for, any other person financial interested in said license or business to be conducted thereunder?   Yes No If yes, explain in the adjacent space provided.	No
<ul> <li>B. Is the licensed premises presently open and operating?</li> <li>Yes No If no, please provide information requested in adjacent space provided.</li> </ul>	Closure Date: New "B"
	Explanation:
9. Oo any of the applicant(s) have any indebtedness or other financial obligations to any manufacturer, brewer, distiller, or wholesales at the time of making this application?  Yes No If Yes, please provide information as to the applicant(s) indebted, the amount of indebtedness, and the name of the manufacturer, brewer, distiller, or wholesaler in the adjacent space provided.	

10. Please list the follow	ing, If applicable, in ti	is spaces provided	helow			
rundhase Pride of	Owner of the Real Property	Cost of the Real Property	Cost of the Business	Cost of the Personal Property	Down Payment provided to seller	Terms for the Balance due
New "	200,00	0.00 Ca	pital in	vestm	ent.	
II. Please list the follow	ing information for th	e Manager of the e	stablishment to be lice	nzed-		
Rang		Adhen		Phone	THE STATE OF THE S	Inal
N	4.					
Applicants Applying as Company/Partnerships	Business Entities - (Gi s list all authorized per	ve name(s) and add	resses - in Corporation	list all officers (attac	h list if necessary) or in Li	mited Liability
1) NAME Binod	Upvety	_ADORESS Town	m)2120	1 TITLE PYCS	Jentage Stock Held Re	SIDENCE: 50%
2) NAME Roshan	Mainali	ADDRESS ADDRESS	Bazustak E Collies	Je Lane	%OF STOCK HELD RE	SIDENCE 251
3) NAME Share	d Khanal	ADDRESS.	ose, (Ag51)	7 mu Sec.	h list if necessary) or in Li 3	SINGUPE OF
4) NAME:					#DF STOCK HELD RE	
					%OF STOCK HELD RE	SIDENCE
crime.	, , , , , , , , , , , , , , , , , , , ,	- open meduje:	n and Conviction (i)	ereor, snall be subj	ontain any false staten ject to penalties provi	ded by Law for that
granted, he/she will co of the Board of Licenso and clerks, The Board	onform to all State an e Commissioners for of License Commissio	d County laws and Baltimore City, and	regulations relating to herby grants permiss	ppiicants nereby cer the sale of alcoholic ion to the State Com	has been a resident and t tifies further that if the lit bevarages, as well as to t ptroller, his duly authoriz aes, and any peace office ill parts thereof upon and	ense applied for is he rules and regulation of deputies, inspectors
1011	moter	/				
Signature of Applicant A	13 person	- V	ure of Applicant B	るだ		
		aignati	ure of Applicant 8		Signature of Applic	ant C
State of Maryland: THIS CERTIFIES, THAT OF before the subscriber a	THE 124	ore C	ity	augu	st 20.	15
The applicant (s) names knowledge and belief	1101019	- All A	(-nn	al P	BISHWalk	ayma (his. her. their)
	Gl	une 1	Danas		DAPPA	STATE
(Witness my hand and s	eal)	V	otary Public		NOIS NOIS WERE	ON OWN
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Name and Address of the owners of the premise/landlord: DO OVES HAVIS Phone Number: 410 574-579  STATEMENT OF DWNER OF PREMISES REQUIRED IN CONNECTION WITH ALCOHOLIC BEVERAGES LAW OF MARYLAND  (I. WE) HEREBY CRIIFY. That (I am, we are) the owner(s) of the property located at application made to Board of Liquid License Commissioners of Baltimore. City with a Zip Code of 2 210 which is named in the present the license applied for, and hereby authorize the State Comptroller, his duly authorized deputies, inspectors and clerks, the Board of Liquid License Commissioners of Baltimore City, its duly authorized agents and employees, and any peace officer of the City of Baltimore and State of Maryland, to inspect conducted, at any and all hours.  (Witness (my, our) hand(s) and seal(s) this day of day of day in the year of 2015  WITNESS PASSON.	
HEREBY CRTIFY. That (I am, we are) the owner(s) of the property located at application made to Board of Liquor License Commissioners of Baltimore City under the Alcoholic Beverage Laws of Maryland and assent to the granting of Commissioners of Baltimore City, its duly authorized before any peace officer of the City of Baltimore and State of Maryland, to inspect conducted, at any and all hours.  HEREBY CRTIFY, That (I am, we are) the owner(s) of the property located at application made to Board of Liquor License application made to Board of Liquor License Commissioners of Baltimore City, its duly authorized agents and employees, and any peace officer of the City of Baltimore and State of Maryland, to inspect conducted, at any and all hours.  (Witness (my, our) hand(s) and seal(s) this day of day of any of the year of any of the building in which said business is to be conducted.	
application made to Board of Lighor License Commissioners of Baltimore. City with a Zip Code of 2100. which is named in the present the license applied for, and hereby authorize the State Comptroller, his duly authorized deputies, inspectors and clerks, the Board of Liquor License Commissioners of Baltimore City, its duly authorized agents and employees, and any peace officer of the City of Baltimore and State of Maryland, to inspect conducted, at any and all hours.  (Witness (my, our) hand(s) and seal(s) this day of day of any of the year of 2015.	
application made to Board of Lighor Licelese Commissioners of Baltimore City under the Alcoholic Beverage Laws of Maryland and assent to the granting of the license applied for, and hereby authorize the State Comptroller, his duly authorized deputies, inspectors and clerks, the Board of Liquor License and search, without warrant, the premises upon which the business is to be conducted, and any and all parts of the building in which said business is to be (Witness (my, our) hand(s) and seal(s) this day of day of the year of 2015	
the license applied for, and hereby authorize the State Comptroller, his duly authorized deputies, inspectors—and clerks, the Board of Liquor License—and search, without warrant, the premises upon which the business is to be—conducted, and any and all parts of the building in which said business is to be—(Witness (my, our) hand(s) and seal(s) this day of day of day of the year of day of day of day of the year of day of the year of day of the year of day	
Commissioners of Baltimore City, its duly authorized agents and employees, and any peace officer of the City of Baltimore and State of Maryland, to inspect conducted, at any and all hours.  (Witness (my, our) hand(s) and seal(s) this day of day of day of the year of 2015	
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(Witness (my, our) hand(s) and seal(s) this 24h day of dug in the year of 2015	
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Dolores H Haveis III & S	8
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(Witness my hand and seal)	· 3
Notary Public VOVEMO	CY
The following with	1
The following certificates must be signed by at least 3 persons.	
We, the undersigned citizens, real estate owners and registered voters in the City of Baltimore in which the business covered by the	
or a taxpayer of Baltimore City and a resident of the State of Maryland for 2 years preceding this application.	
Names Address Signature Dec	
Signature USS ( Length of time )	
(Month/Year) Acquainted with	
CHANDRA B. 4222 ELSA TER. the Applicant(s)	
BISHWOEARMA BALTIMERE, MD 2/211 [2/11/67 9 Yet 8	
BA VAN 1304 Medfield AVE	
HUYNH Colling Ave	
HUYNH Baltimore, MD 21211 Playar guts 10/26/1953 24 years	
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BALTIMORE, MD 21211  FOR OFFICE USE ONLY  DATE FILED 9 HEW/TRANSFER/EXPANSION - \$500 00 PAID: POSSING DATE 13 15  SUSTITUTE APPLICATION FEE - \$250.00 PAID: PRINT NAME OF BILLS STAFF  NUMBERS  SUMMERS  STATUS OF APPLICATION FEE - \$250.00 PAID: PRINT NAME OF BILLS STAFF  NUMBERS  STATUS OF APPLICATION FEE - \$250.00 PAID: PRINT NAME OF BILLS STAFF  NUMBERS  STATUS OF APPLICATION FEE - \$250.00 PAID: PRINT NAME OF BILLS STAFF  NUMBERS  STATUS OF APPLICATION FEE - \$250.00 PAID: PRINT NAME OF BILLS STAFF  NUMBERS  STATUS OF APPLICATION FEE - \$250.00 PAID: PRINT NAME OF BILLS STAFF  NUMBERS  NUMBERS  NUMBERS  STATUS OF APPLICATION FEE - \$250.00 PAID: PRINT NAME OF BILLS STAFF  NUMBERS  NUMBERS	
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FOR OFFICE USE ONLY  DATE FILED 9 IN MEW/TRANSFER/EXPANSION - \$500 00 PAID POSTING DATE 1   STatus of Application Approved: Yes   No   Date:  Board of Liquor License Commissioners For the City of Baltimore. 231  East Baltimore Street. 6° Floor, Baltimore Maryland 2/27/2	
FOR OFFICE USE ONLY  DATE FILED GILL NEW/TRANSFER/EXPANSION - \$500 DO PAID: POSTING DATE   NTIIALS    Board of Liquor License Commissioners for the City of Baltimore, 231 East Baltimore Street, 6th Floor, Baltimore, Maryland 21202  Phone: 410-396-4377 Fay AIR, 336, 4382  Part   Medfield Ave   Ravara gular   10/26/1453    Read of Liquor License Commissioners for the City of Baltimore, 231 East Baltimore Street, 6th Floor, Baltimore, Maryland 21202  Date: 410-396-4377 Fay AIR, 336, 4382	
FOR OFFICE USE ONLY  DATE FILED 9 IN NEW/TRANSFER/EXPANSION - \$500 00 PAID: POSTING DATE 1 3 ID  SUSTITUTE APPLICATION FEE - \$250.00 PAID: PRINT NAME OF BLIC STAFF INTIIALS  Board of Liquor License Commissioners for the City of Baltimore. 231  East Baltimore Street. 6th Floor, Baltimore Maryland 7(27)?	



# Vegan Delights

All entrees served with long grain Basmati rice. Please tell us how you would like your entree spiced...Mild, Medium, Hot or Indian Hot.

Aloo Karahi \$12 Potatoes cooked in cumin seed base, Bombay style Aloo Gobi \$12 Potatoes & cauilflower sauteed with ginger, tomatoes & spices

Baingan Bharta \$12 Eggplant baked in our Tandoori Clay Oven then mashed & sauteed with garlic, onlons & tomatoes

Bhindi Masala \$12 Fresh baby okra sauteed with onlons, bell peppers, tomatoes & spices

Dal Tadka \$12 Yellow lentiis cooked with fresh onlons, tomatoes, garlic & spices Aloo Matar (Potato & Pea Curry) \$12 Potatoes & peas cooked in an onion & tomato sauce with indian seasonings

Chana Masala \$12
Chickpeas slowly simmered with onlons & tomatoes,
then gamished with fresh herbs

Gobl or Vegetable Manchurian \$12 Cooked in a fresh garlic, ginger & soy sauce, Indo-Chinese fusion curry

# Vegetarian Delights

All entrees served with long grain Basmati rice, Please tell us how you would like your entree spiced...Mild, Medium, Hot or Indian Hot.

Navratan Korma \$12 Fresh garden vegetables & a special blend of spices cooked in a light cream, cashew nut sauce

Sabg Paneer \$13 Cooked spinach with homemade Indian cheese cubes, Spices & herbs

Matal Kotta \$12 Mixed vegetables & Paneer balls served in a spiced Paneer Chill \$13
Homemade cheese slices in a special spices with onions, bell peppers, say sauce & a touch of garlic

Dat Makhani \$12 Slow simmered lentiis sauteed in butter with fresh garlic, ginger and tomatoes

Matar Paneer \$1.3 Peas & Indian cheese in a delicately spiced sauce of onions, cumin & curried chana masala

Paneer Tikka Masaia \$13 Homemade cheese cubes, onlons, bell peppers & tomato sauce with fresh horbs

# Mughal Biryanis

A traditional rice dish made with Basmati rice, nuts & raisins Lamb Biryani \$17

Shrimp Biryani \$17 Chicken Biryani \$17 Vegetable Biryani \$14

## Indian Breads

No Indian meal is complete without bread! All our breads are freshly baked per order in our Tandoori Clay Oven.

Naan \$2 Traditional unicavened white bread Garile Naan \$2 Naan topped with fresh gariic & herbs Roti \$2 Unleavened layered whole wheat bread topped with butter

Allo Kulcha \$3 Naan stuffed with mildiy spiced potatoes

Keema Naan \$3 Naan stuffed with shredded lamb & herbs

Peshwari Naan \$3 Naan stuffed with raisins, cashew nuts & coconut Assorted Basket of Bread \$6 An assortment of garlic naan, roti & the today's special naan creation

# Tempting Desserts

Kulfi (Mango/Pistachio) \$5 Your choice of Mango or Pistachio traditional Indian Ice cream

Gulab Jamun \$4 Light cheese balls dipped in a cinnamon flavored syrup

Vanilla Ice Cream \$4

Kheer \$4 Traditional Indian rice pudding with nuts, flavored with cardamom and rose water

### Beverages

Masala Tea \$3
Tea/Green Tea \$2
Sweet Tea \$2
Coftee \$2
Coke, Diet Coke & Sprite \$2

\*All menu items are subject to change based on availability.

# \$10.99

# JUNCH BUFFET

Mon - Fri 11 am - 3 pm Sat - Sun 11 am - 3:30 pm

1) Namaste Balthmore Instanciosine

8118-010-8118

A13 W. ladd Spring Lane Baltimorp, MD 21210



Hours Sun - Thurs 11 am - 10 pm Fri - Sat 11 am - 10:30 pm

Rich & delicately seasoned cream soup with crabmeat morsels Cream of Crab \$5

An Indian prepared tomato soup with a touch of black pepper & cream Tomato Soup \$4

A spicy Asian-style broth based soup Vegetable Munchu Soup \$4 Chicken

Mulligatawny Soup \$4
Traditional Indian soup made with delicately spiced lentils & seasoned with mustard seed

Hot grilled chicken breast or Avocado fresh from the special Clay Oven & tossed with fresh garden vegetables, it is served with choice of Ranch, Italian or Taj Palace's House Dressing Avocado or Chicken Salad \$8 / \$9

Lettuce, tomatoes & cucumber tossed with Taj Palace's House Dressing Mixed Garden Salad \$8

### Appetizers

fritter made with lentil flour batter & fried to a golden perfection Vegetable \$5 - Delicately spiced vegetable fritters Paneer \$7 - Filled with homemade cottage cheese

Vegetable \$2 - Stuffed with mildly spiced potatoes & peas Meat \$3 - Minced lamb seasoned with Indian spices Crispy fried stuffed turnovers

Chicken \$7 - Broiled chicken, cucumbers, tomato & chopped onions seasoned with a tangy chast masala, fresh time juice, mint, tamarind & cortander Chaat

Samosa \$6. Served on a bed of curried chickpeas topped Alu Papdi \$6 - Chopped potatoes with wheat wafers, tossed in tamaring sauce, topped with yogurt & seasoned with chaat masala

Strimp marinated in buttermilk, fried until golden brown & Rock Shrimp \$9

with seasoned yogurt and chutney

Boneless white meat chicken or cheese in special spices with Chicken or Paneer Chili Appetizer \$8 / \$7 tossed with a mayo sweet chill sauce

onions, bell peppers, say sauce & a touch of garlic

Chicken or Vegetable Momo \$6 / \$5 Chicken marinated in Nepall spices stuffed in Nour wrap and

steamed Served with a special spicy sauce. Chicken Wings \$8

Marinated chicken wings breaded & tossed with a special sauce

Goat Curry

Tender goat meat cooked in a curry sauce served with long grain Basmall rice. Please tell us how you would like your entree spiced. Mild, Medium, Hot or Indian Hot.

# Tandoori Clay Oven Specialties

All entrees are served with long grain Basmati rice & your choice of Dal Makhani (a yellow lentil sauce) or creamy spinach Tandoori Chicken \$12

Half a spring chicken marinated in yogurt with mild spices, then roasted in our Tandoori Clay Oven

Lamb Chops \$21
Succulent lamb chops marinated & cooked in our Tandoori Clay Oven

Boneless, fresh salmon marinated in aromatic herbs & spices, then broiled in our Tandoorl Clay Oven Salmon Tikka \$19

Minced lamb mixed with onlons, delicately spiced with herbs, then roasted on skewers in our Tandoori Clay Oven Seekh Kebab \$16

jumbo shrimp marinated in herb mixture & delicately broiled in our Tandoori Clay Oven Tandoori Shrimp \$19

Chicken Tikka \$16
Succulent, boneless chicken breast marinated in our special recipe & broiled to perfection in our our Tandoori Clay Oven

Tandoori platter serving assorted Indian Specialities: chicken tikka. tandoori chicken, seekh kebab & jumbo shrimp Tandoori Mixed Grill \$19

# Chicken Specialties

All entrees served with long grain Basmati rice. Please tell us how you would like your entree spiced...Mid, Medium, Hot or Indian Hot.

Boneless white meat chicken curry with spinach Chicken Saag \$14

Tandoori boneless dark meat chicken delicately spiced with Indian Chicken Makhani (Butter Chicken) \$14 herbs, then cooked in buttery sauce

Boneless white meat chicken cooked with potatoes in a highly spiced tangy hot sauce Chicken Vindaloo \$14

Chicken Curry \$14

Boneless white meat chicken cooked in an exotic curry sauce

Boneless white meat chicken simmered in a mild cashew sauce, gamished with raisins & cashews Chicken Korma \$14

Boneless dark meat chicken in special spices with onions, bell peppers, say sauce & a touch of garlic Chicken Chili \$14

Boneless white meat chicken cooked with spinach, onions, Chicken Tikka Masaia \$14 .tomatoes & bell peppers

Chicken Manchurlan \$14

Boneless dark meat chicken cooked with vegetables in fresh gartic, ginger
& soy sauce, indo-Chinese fusion curry

Let us cater your next event.

# Lamb Delicacies

All entrees served with long grain Basmati rice. Please tell us how you would like your entree spiced...Mild, Medium, Hot or Indian Hot.

Lean lamb cooked in a curry sauce Lamb Rogan Josh \$15

Lamb cooked with crushed cashew nuts & almonds, then enriched with a fresh cream & yogurt Lamb Pasanda \$15

Lamb cooked with spinach & herbs Lamb Saag \$15

A South Indian dish traditionally seasoned hot. Lamb with potatoes in a tangy curry sauce Lamb Vindaloo \$15

Lamb simmered in a mild cashew sauce Lamb Korma \$15

Lamb sauteed with onion, bell peppers, tomatos, broccoli, ginger-genic & herbs Lamb Shuna \$15

# Seafood Delicacies

All entrees served with long grain Basmati rice. Please tell us how you would like your entree spiced...Mild, Medium, Hot or Indian Hot.

Salmon cooked with spinach, onlons, tomatoes & bell peppers Salmon Tikka Masala \$19 Seafood Vindaloo \$19

Jumbo shrimp & salmon cooked with potatoes in a spiced tangy sauce. Shrimp Masala \$16

Shrimp simmered in a cream sauce with tomatoes, broccoil, a touch of onions, bell peppers and fenugreek leaves.

## Accompaniments

Grated cucumbers & fresh herbs mixed with refreshing. homemade yogurt

Mango Chutney \$2 Sweet & mildly spiced mangoes & herbs

Hot & spicy mixed Indian spices

Mint Chutney \$2

A blend of mint, cilantro, herbs & spices

Papadum \$3 Crisp, lightly spiced lentil wafers

a purchase of \$25 or more.

Offer valid on dine in or carryout. One coupon per order. Cannot be combined with any other offer.