

**BOARD OF LIQUOR LICENSE COMMISSIONERS FOR BALTIMORE CITY**  
**DOCKET - THURSDAY, OCTOBER 15, 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) :**

- 1. Daniel Sang Min Kim & Elizabeth Porter, CR Market, Inc. T/a CR Market, 712-14 W. Mosher Street - Class "A" Beer & Wine License - Application to transfer ownership**
- 2. Jung Baik, Jen's Place, Inc. T/a Jen's Place, 1503-05 Light Street - Class "BD7" Beer, Wine & Liquor License - Application to transfer location of a Class "BD7" BWL license presently located at 1501-05 Light Street to 1503-05 Light Street**
- 3. Dhruva Onta & Daoud Faddoul, BDU Nepal, LLC T/a Bristol Liquors, 507 S. Broadway - Class "BD7" Beer, Wine & Liquor License - Application to transfer location of a Class "BD7" BWL license presently located at 507 S. Broadway to 501 S. Broadway**
- 4. Georgios Aligeorgas, Harbor East Venture, LLC T/a trade name pending, 1010 Aliceanna Street - Class "BD7" Beer, Wine & Liquor License - Application to change a Class "B" BWL to a Class "BD7"**

**II. Regular Docket (New applications and hardship extension):**

- 1. Christopher Nwaeze & Musibau Shittu, C and G Group, LLC T/a Posh-Mix, 8-14 Park Avenue - 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**
- 2. Donald Kelly & Justin Dvorkin, 901 Hamden, LLC T/a Trade name pending, 901 W. 36<sup>th</sup> Street - 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, requests for live entertainment, outdoor table service and off-premise catering**
- 3. Maria Streb, Paull Daino & Sean Fitzpatrick, Niki, LLC T/a Handlebar Café, 511 S. Caroline Street - Class "B" Beer, Wine & Liquor License - Application for**

a new Class "B" Beer, Wine & Liquor restaurant license under the provisions of Article 2B Section 6-201 (d) (vii) \$500,000 in capital investment in restaurant fixtures and facilities and seating capacity for a minimum of 75 people, request for outdoor table service, live entertainment & off-premises catering

### III. Violations:

1. **Mustafa Jackson & Brittney Moore, Four One Four, LLC T/a Kings and Diamonds, 414-16 E. Baltimore Street – Class "BD7" Beer, Wine & Liquor/Adult Entertainment - Violation of Rule 4.17(a) Sexual Practices and Obscenity** –August 8, 2015– Starting at approximately 9:30 PM, members of the Baltimore City Police Department's Vice Squad conducted an undercover investigation at the establishment. At approximately 11:30 PM, Det. Gatto, of the Vice Squad, made contact with an individual later identified as Ms. Shadyrra Jacobs who was a dancer at the establishment. Det. Gatto initiated a conversation with Ms. Jacobs who stated that she would have sexual intercourse with Det. Gatto for \$600 outside of the establishment or for \$300 if he preferred to have sexual intercourse inside of the establishment.

**Violation of Adult Entertainment Rule 9 Codes Compliance** – August 8, 2015– Starting at approximately 9:30 PM, members of the Baltimore City Police Department's Vice Squad conducted an undercover investigation at the establishment. At approximately 11:30 PM, Det. Gatto, of the Vice Squad, made contact with an individual later identified as Ms. Shadyrra Jacobs who was a dancer at the establishment. Det. Gatto initiated a conversation with Ms. Jacobs who stated that she would have sexual intercourse with Det. Gatto for \$600 outside of the establishment or for \$300 if he preferred to have sexual intercourse inside of the establishment.

**Violation of Rule 4.17(a) Sexual Practices and Obscenity** –August 8, 2015– Starting at approximately 9:30 PM, members of the Baltimore City Police Department's Vice Squad conducted an undercover investigation at the establishment. At approximately 11:30 PM, Det. Garrett, of the Vice Squad, entered the establishment and later made contact with an individual later identified as Ms. Cabrina Robinson who was a dancer at the establishment. Det. Garrett initiated a conversation with Ms. Jacobs who stated that she would have sexual intercourse with Det. Garrett in the stage area for \$200.

**Violation of Adult Entertainment Rule 9 Codes Compliance** – August 8, 2015– Starting at approximately 9:30 PM, members of the Baltimore City Police Department's Vice Squad conducted an undercover investigation at the establishment. At approximately 11:30 PM, Det. Garrett, of the Vice Squad, entered the establishment and later made contact with an individual

later identified as Ms. Cabrina Robinson who was a dancer at the establishment. Det. Garrett initiated a conversation with Ms. Jacobs who stated that she would have sexual intercourse with Det. Garrett in the stage area for \$200.

2. **Lois Finifter, M.M. & T., Inc. T/a Joe's Place, 6200 Reisterstown Road – Class "BD7" Beer, Wine & Liquor License - Violation of Rule 4.15 Gambling – September 2, 2015/August 15, 2015/July 28, 2015 – At approximately 9:00 PM, members of the Baltimore City Police Department's Vice Squad executed a search and seizure warrant in reference to an undercover illegal gambling investigation where Det. Akinwande and Det. Garrett had previously observed multiple pay outs on video slot gaming machines in the establishment on July 28, 2015 and August 15, 2015. Upon execution of the search and seizure warrant, Baltimore Police recovered: (1) 3 poker machine switches; (2) 3 power packs; (3) Poker machine mother boards; (4) Payout Slips; and (5) U.S. Currency Dollar amount: \$3,931.00.**

***\*Please note that times given above are approximate. Parties are encouraged to arrive at least 30 minutes prior to the time noted above, items may be moved and postponed items can be heard early to move the agenda forward. Also note that parties are asked to submit and written requests and all documents and requests to the liquor board at least 72 hours before the scheduled hearing.***

**Transfer of Ownership**

**Applicant: Daniel Sang Min Kim & Elizabeth Porter**

**CR Market, Inc. T/a CR Market**

**712-14 W. Mosher Street**

**Class "A" Beer, Wine & Liquor**

**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

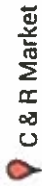
Last Inspection Date: April 3, 2015

SDAT: In Good Standing

**BOARD'S DECISION:**

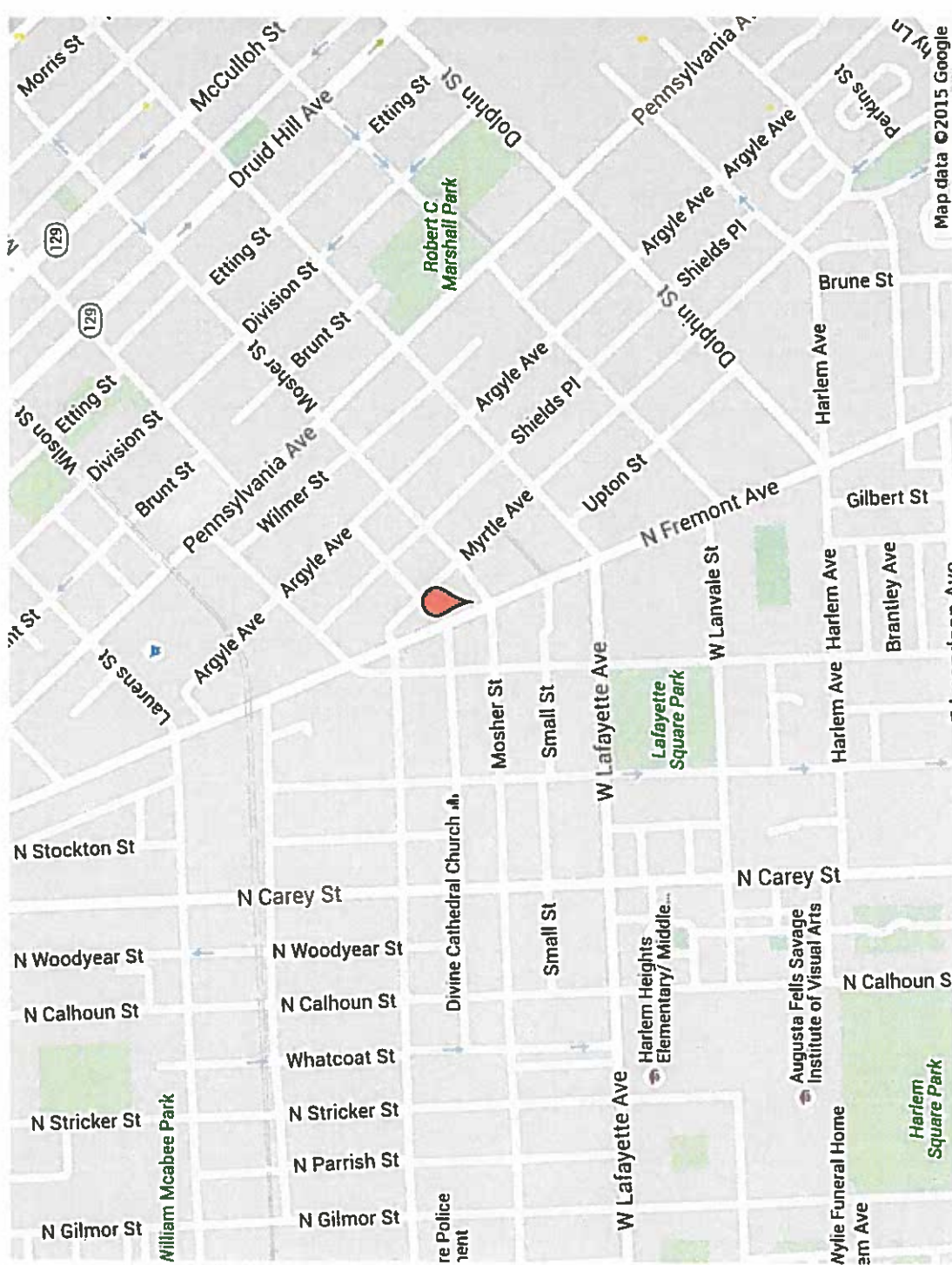
# 712-14 W. Mosher Street

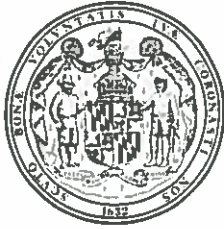
Licensed Establishments



C & R Market

Liquor License Map





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

Zoning District \_\_\_\_\_  
 \_\_\_\_\_  
 Date: \_\_\_\_\_  
 ZONING DIVISION \_\_\_\_\_  
 Department of Housing and  
 Community Development

**Alcoholic Beverage License Application**

Application for a Class A BW License at the location 712-714 MOSHER ST.  
 Corporate/LLC name CR MARKET, INC. Trade name CR MARKET  
 Attorney for Applicant (s) FRANK SHAULS Address: 6730 HOLABIRD AVE. BALTO, MD 21224 Phone: 443 535-2435

To the Board of Liquor License Commissioners for Baltimore City:

Application is made by the undersigned for the above license under the provisions of Article 2B of the Annotated Code of Maryland as amended, and the following information is submitted as required by the Article:

**1. Applicant(s)**

(A) Name: DANIEL SHANG-MIN KIM  
 Address: 873B TOWN & COUNTRY BLVD, ELLICOTT CITY, MARYLAND Zipcode: 21043  
 Home phone number 443 538-2361 Date of birth 10-14-88 Sex MALE  
 Place of birth KOREA How long at current address? 1YR  
 Have you been a resident or taxpayer of Baltimore City for 2 years preceding the filing of this application? NO  
 City resident: Yes \_\_\_ No X or Address of property on which tax is paid in your individual name: N/A

Have you ever been convicted of a felony? Yes \_\_\_ No X Been found guilty of violation of alcoholic beverage laws? Yes \_\_\_ No X Been found guilty of violating gambling laws? Yes \_\_\_ No X Been found guilty of any offense against the laws of the United States? Yes \_\_\_ No X If yes, provide details: \_\_\_\_\_

What financial interest do you have in the business to be conducted under this license? 100% 99.999%

Are you financially interested in any other alcoholic beverage business for which a license has been applied, granted or issued? Yes \_\_\_ No X Do you have any indebtedness or other financial obligations to any manufacturer, brewer, distiller, or wholesaler at the time of making this application? Yes \_\_\_ No X Have you previously held a license for the sale of alcoholic beverages? Yes \_\_\_ No X If yes, state when and where: \_\_\_\_\_

Is there anyone else who has a financial interest in this license or the business to be conducted under it? Yes \_\_\_ No X

If granted a license, will you incur any indebtedness or financial obligation to any manufacturer, brewer, distiller or wholesaler other than for the purchase of alcoholic beverages? Yes \_\_\_ No X

If granted a license, will you conform to all laws and regulations relating to the business in which you propose to engage? Yes X or No \_\_\_ Do you consent to the Board of Liquor License Commissioners being furnished with a copy of your arrest record, if any? Yes X No \_\_\_

(B) Name: ELIZABETH ANN PORTER  
 Address: 413 VINCENT ST. Zipcode: 21223  
 Home phone number 443 810 5687 Date of birth 6/13/1946 Sex F  
 Place of birth KINTWOOD, WEST VIRGINIA How long at current address? 11 YRS  
 Have you been a resident or taxpayer of Baltimore City for 2 years preceding the filing of this application? YES  
 City resident: Yes X No \_\_\_ or Address of property on which tax is paid in your individual name: 413 VINCENT ST., BALTO, MD 21223

Have you ever been convicted of a felony? Yes \_\_\_ No X Been found guilty of violation of alcoholic beverage laws? Yes \_\_\_ No X Been found guilty of violating gambling laws? Yes \_\_\_ No X Been found guilty of any offense against the laws of the United States? Yes \_\_\_ No X If yes, provide details: \_\_\_\_\_

What financial interest do you have in the business to be conducted under this license? .001%

Are you financially interested in any other alcoholic beverage business for which a license has been applied, granted or issued? Yes \_\_\_ No X Do you have any indebtedness or other financial obligations to any manufacturer, brewer, distiller, or wholesaler at the time of making this application? Yes \_\_\_ No X Have you previously held a license for the sale of alcoholic beverages? Yes \_\_\_ No X If yes, state when and where: \_\_\_\_\_

Is there anyone else who has a financial interest in this license or the business to be conducted under it? Yes \_\_\_ No X

If granted a license, will you incur any indebtedness or financial obligation to any manufacturer, brewer, distiller or wholesaler other than for the purchase of alcoholic beverages? Yes \_\_\_ No X

If granted a license, will you conform to all laws and regulations relating to the business in which you propose to engage? Yes X or No \_\_\_ Do you consent to the Board of Liquor License Commissioners being furnished with a copy of your arrest record, if any? Yes X No \_\_\_

Office use only:

transfer of ownership

(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 Baltimore City for 2 years preceding the filing of this application? \_\_\_\_\_  
City resident: Yes \_\_\_ No \_\_\_ or Address of property on which tax is paid in your individual name: \_\_\_\_\_

Have you ever been convicted of a felony? Yes \_\_\_ No \_\_\_ Been found guilty of violation of alcoholic beverage laws? Yes \_\_\_ No \_\_\_  
Been found guilty of violating gambling laws? Yes \_\_\_ No \_\_\_ Been found guilty of any offense against the laws of the United States? Yes \_\_\_ No \_\_\_ If yes, provide details: \_\_\_\_\_

What financial interest do you have in the business to be conducted under this license? \_\_\_\_\_

Are you financially interested in any other alcoholic beverage business for which a license has been applied, granted or issued? Yes \_\_\_ No \_\_\_ Do you have any indebtedness or other financial obligations to any manufacturer, brewer, distiller, or wholesaler at the time of making this application? Yes \_\_\_ No \_\_\_ Have you previously held a license for the sale of alcoholic beverages? Yes \_\_\_ No \_\_\_ If yes, state when and where: \_\_\_\_\_

Is there anyone else who has a financial interest in this license or the business to be conducted under it? Yes \_\_\_ No \_\_\_

If granted a license, will you incur any indebtedness or financial obligation to any manufacturer, brewer, distiller or wholesaler other than for the purchase of alcoholic beverages? Yes \_\_\_ No \_\_\_

If granted a license, will you conform to all laws and regulations relating to the business in which you propose to engage? Yes or No Do you consent to the Board of Liquor License Commissioners being furnished with a copy of your arrest record, if any? Yes \_\_\_ No \_\_\_

2. Address of the place to be licensed 712-714 MOSHER ST. Zipcode 21217

Phone number 410 225-2214 Part of the building in which the business will be conducted FIRST FLOOR

Will you provide live entertainment? NO What kind? N/A

Outdoor table service? NO Off premises catering of food and alcohol? NO

Will you offer delivery of food and/or alcohol? NO

The name, address and telephone number of the owner of the real property in which the business is to be operated OK YOU, 1 CHANCERY CT, REISTERSTOWN, MD 21136 443 465-9902

What merchandise will be handled in connection with sale of alcoholic beverages? SUNDRIES

I submit herewith a statement duly executed and acknowledged by the owner of the premises in which the business is to be conducted, assenting to the granting of the license applied for, authorizing the Comptroller, the 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 Baltimore City, 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 conducted, at any and all hours. I also submit herewith, and as a part hereof, a certificate signed by at least three citizens whom I know to be owners of real estate and registered voters of the city in which the business is to be conducted, containing the voting residence of each and the real estate situated in the city where the business is to be conducted of which each is the owner, and setting forth the length of time each has been acquainted with the applicant; and certifying that they have examined this application, that they have good reason to believe that all of the statements contained herein are true, that they are of the opinion that the applicant is a suitable person to obtain the license applied for, and that they are familiar with the premises upon which the proposed business is to be conducted and believe them suitable for the conduct of the business of a retail dealer in alcoholic beverages.

Extract from Law - If any signed statement, report, affidavit or oath, required under any of the provisions of this Article shall contain any false statement, the offender shall be deemed guilty of perjury, and upon conviction thereof, shall be subject to the penalties provided by law for that crime.

AR  
x Elizabeth A. Porter

Applicant

AFFIDAVIT

STATE OF MARYLAND, City of Baltimore,

THIS CERTIFIES, That on the 7th day of AUGUST, 2015,

before the subscriber, a NOTARY PUBLIC of the State of Maryland, personally appeared

DANIEL SANG MINKIM & ELIZABETH ANN PORTER  
the applicant named in the foregoing application, and made oath in due form of law that the statements therein are true to the best of his knowledge and belief.

WITNESS my hand and official seal:  
Seung Hwan Oh  
Notary Public  
Baltimore County  
Maryland

(S-11)

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

I We HEREBY CERTIFY, That I am we are the owner(s) of property known as 712-714 W MARKET ST  
BALTO, MD 21217

named in the application made by CR MARKET, INC.  
to the Board of Liquor License Commissioners of Baltimore City, under the Alcoholic Beverages Law of Maryland, for a  
CLASS A BW LIQUOR LICENSE

License expiring April 30, 20\_\_\_\_; that I We assent to the granting of the license applied for, and that I We hereby  
authorize the State Comptroller, his duly authorized deputies, inspectors and clerks, the Board of Liquor License Com-  
missioners of Baltimore City, its duly authorized agents and employees and any peace officer of Baltimore City 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 conducted, at any and all hours.

Witness my our hand(s) and seal(s) this 15TH day of JULY, 2015

Frank R. Pliva  
Witness

OK YOU  
Name, Address, and Phone Number of Property Owner

Address 1699 S. HANOVER ST  
21230

### READ CAREFULLY

(The following certificate must be signed by at least THREE CITIZENS.)

We, the undersigned reputable citizens, certify:

- (1) That we are the owners of real estate situated in the City of Baltimore.
- (2) 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 with applicant
<u>Frank R. Pliva</u>	Voting Residence <u>1699 S. HANOVER ST.</u> Property Owned <u>1699 S. HANOVER ST.</u>	<u>2 1/2 YRS</u>
<u>Peter Pliva</u> PETER PLIVA	Voting Residence <u>1321 S. HANOVER ST</u> Property Owned <u>1321 S. HANOVER ST.</u>	<u>2 1/2 YRS</u>
<u>Naima Pliva</u> NAIMA PLIVA	Voting Residence <u>1321 S. HANOVER ST.</u> Property Owned <u>1321 S. HANOVER ST</u>	<u>2 1/2 YEARS</u>
	Voting Residence _____ Property Owned _____	
	Voting Residence _____ Property Owned _____	

(The names and addresses of the signers must be printed or typewritten above their signatures)



FOR CLUBS, CORPORATIONS, PARTNERSHIPS AND ASSOCIATIONS

Name of Corporation, Partnership, Club or Association CR MARKET, INC.

Trade Name CR MARKET

Address 712-14 MOSHER ST, BALTO., MD 21217

Names of all officers or partners:

DANIEL SANG MIN KIM PRESIDENT

Names and addresses of all Stockholders

Percentage of Stock Ownership

DANIEL SANG MIN KIM 99.999

ELIZABETH ANN PORTER .001

DK  
x President or Vice-President  
DANIEL SANG MIN KIM

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 ELIZABETH ANN PORTER

VOTING ADDRESS 413 VINCENT ST, BALTO, MD 21223

PROPERTY ON WHICH TAX IS PAID 413 VINCENT ST., 21223

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.

WITNESSES:

Frank R. Shultz

x Harry Jang Hwak Hwang  
JANG HAK JIN

**BOARD OF LIQUOR LICENSE COMMISSIONERS FOR BALTIMORE CITY  
APPLICANTS' INTERVIEW FORM**

ADDRESS OF LICENSED PREMISES: 712-714 MOSHER ST. 21217

1. Corporate Name (if any): C R MARKET, INC.

2. Biographical background of each applicant:

(a) Name: DANIEL SANG MIN KIM D.O.B. 10/14/1988 Marital Status M

Address: 8738 TOWN & COUNTRY BLVD. Home phone: 443-538-2361

Employment History for past 10 years (Please provide dates for various employers):

Triple C Employed Since Graduated from College Syrs.

(b) Name: Elizabeth Ann Porter D.O.B. 6/13/1946 Marital Status M

Address: 413 Vincent St Home phone: 443-810-5687

Employment History for past 10 years (Please provide dates for various employers):

Housewife

(c) Name: \_\_\_\_\_ D.O.B. \_\_\_\_\_ Marital Status \_\_\_\_\_

Address: \_\_\_\_\_ Home phone: \_\_\_\_\_

Employment History for past 10 years (Please provide dates for various employers):

3. If married applicant's spouse is not an applicant or stockholder, give spouse's full name, date and place of birth, Social Security number, home address, place of employment for the past ten years and the reason why the spouse is not going on the license:

	Spouse's Name	DOB	Place of Employment	Reason not going on license
(a)	J: Young Park Born Korea	10/21/1977	NONE	HOUSEWIFE
(b)	JOHN PORTER		SELF CONSTRUCTION	NO INTEREST
(c)				

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

Full name	Address	DOB	Employment	\$ Investment	Source of funds
N/A					

5. Purchase price of business: NONE - LEAVING BUSINESS Down payment \_\_\_\_\_

Terms for balance due TOO DANGEROUS ROITS BURNED OUT

Payee EVERYTHING LOST

Owner of real property OK YOU 443 465 9902 Phone #: \_\_\_\_\_

Rental fee and terms of lease 5YRS @ \$1500.00 PER MONTH  
or

Cost of real property \_\_\_\_\_ Down payment \_\_\_\_\_

Terms for balance due \_\_\_\_\_

Payee \_\_\_\_\_

or

Cost of business and property \_\_\_\_\_ Down payment \_\_\_\_\_

Terms for balance due \_\_\_\_\_

Payee \_\_\_\_\_

6. Source of funds: (a) Indicate the source of funds being used by each applicant to purchase the business. (b) If funds to purchase the business are a gift or loan, identify person/institution from whom funds are being obtained. (c) If the funds to purchase the business are not presently on deposit, indicate yearly earning from applicant's place of employment or business. (Personal income tax records may be requested by the Board to verify income.) (d) If funds are from personal savings, indicate approximate balance of all bank/investment accounts for past two years (such records to be presented to the Board upon request).

Name: DANIEL SANG MIN KIM  
FAMILY & SAVINGS

Name: ELIZABETH PORTER  
NO SIGNIFICANT FINANCIAL INTEREST

Name: \_\_\_\_\_

7. Indicate where other financial assistance may be derived if needed by applicants/business:

FAMILY

8. Who will be the full time operator of the establishment?

DANIEL SANG MIN KIM

If a manager is to be hired, biographical information must be submitted:

Name \_\_\_\_\_ Address \_\_\_\_\_

D.O.B. \_\_\_\_\_ S.S.N. \_\_\_\_\_ Marital Status \_\_\_\_\_

Employment history for the past 10 years: \_\_\_\_\_

9. Describe the licensed premises: 1 STORY BRICK BUILDING

1st FLOOR BUSINESS & STORAGE

10. Have you previously held an alcoholic beverage license in the State of Maryland or in any other state? If so, where and when?

Name: DANIEL SANG MIN KIM NO

Name: ELIZABETH PORTER NO

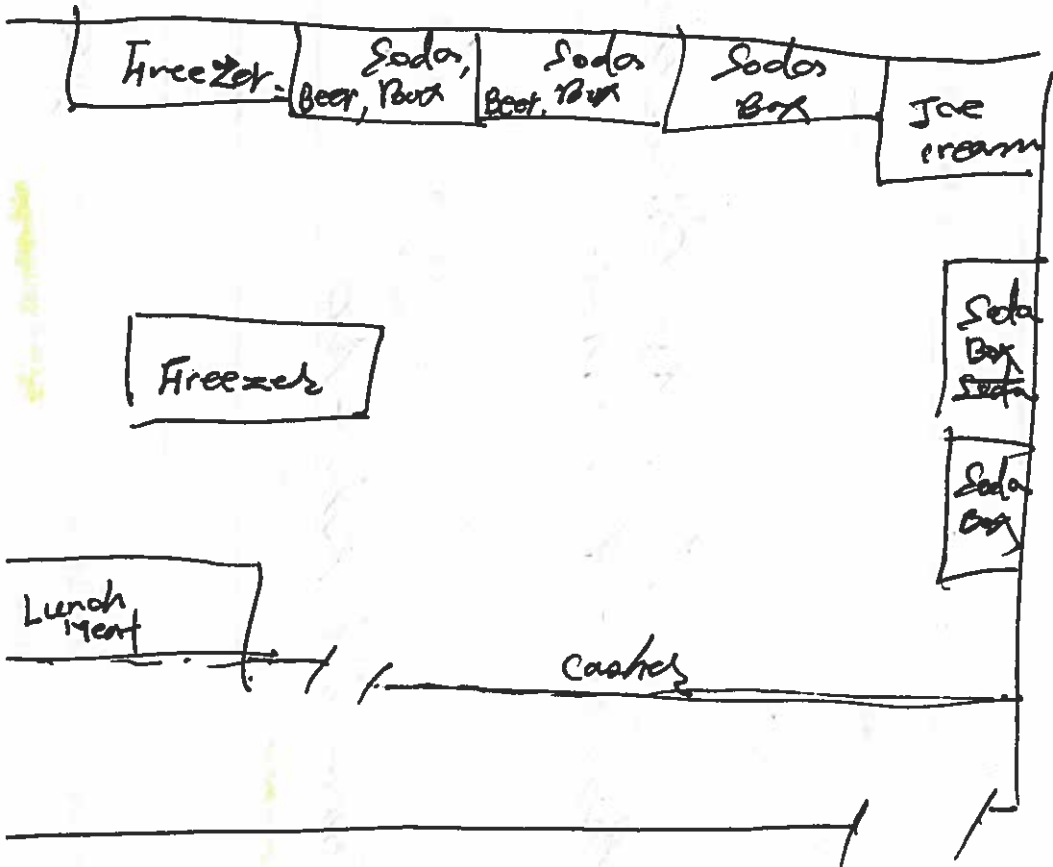
Name: \_\_\_\_\_

11. Is the licensed premises presently open and operating? YES  
If not, when did the establishment close? \_\_\_\_\_

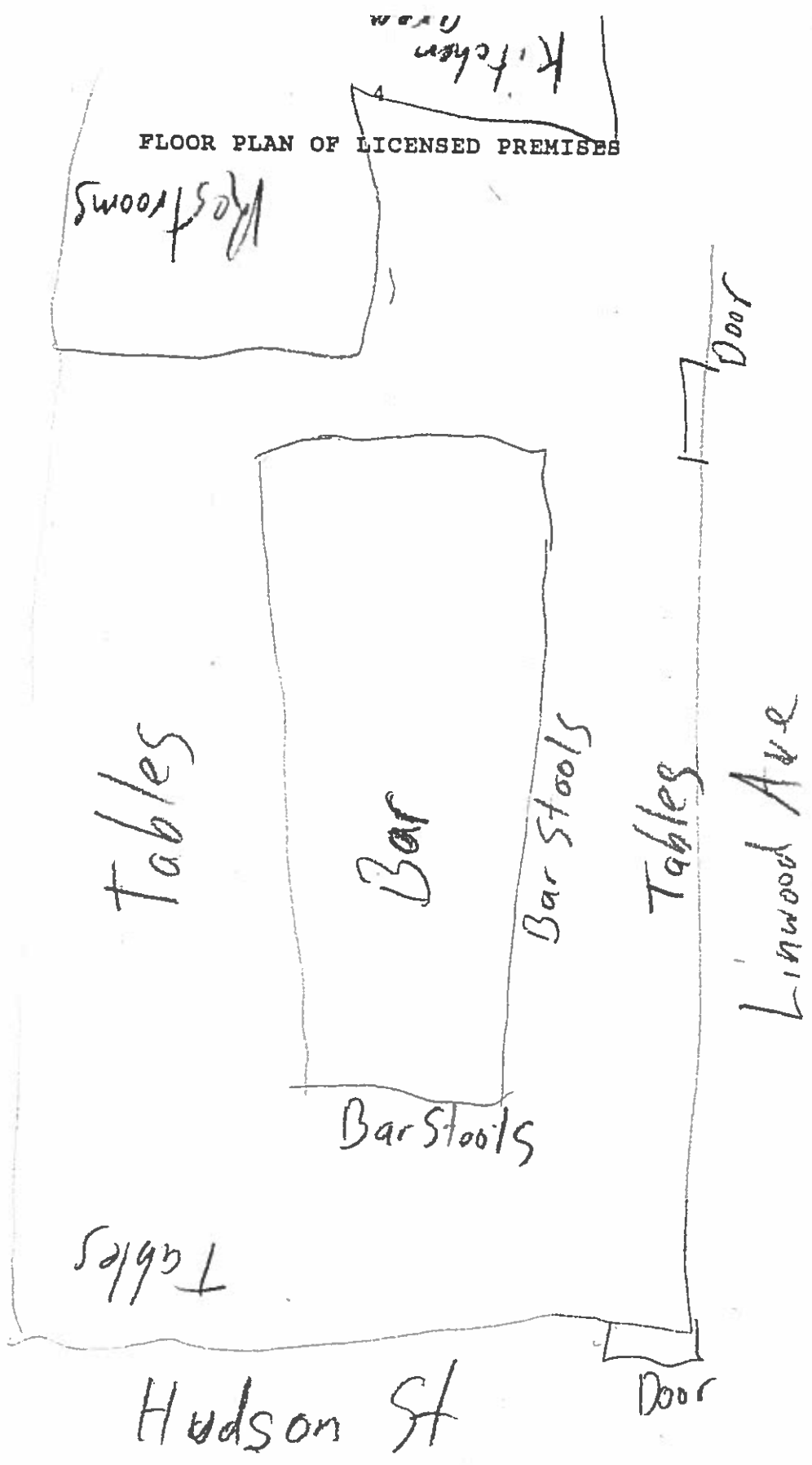
12. Whom may we contact about posting the transfer notice? Name, address, phone number: DANIEL KIM 443 538 2361

13. Inspector(s) handling transfer: \_\_\_\_\_

Date of interview \_\_\_\_\_



FLOOR PLAN OF LICENSED PREMISES



Kitchen

Restrooms

Tables

Bar

Bar Stools

Tables

Bar Stools

Tables

Hudson St

Linwood Ave

Door

Door



## Liquor Board System

Version 1.0

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

### License Detail

#### License Info

License Num: WA 002      Cert Num: 0090      Fee: \$110.00      Status: Renewed  
 License Date: 5/1/2015      License Year: 2015  
 CR Number: 15179687  
 Payment Date: 04-16-15

2014 - 2015 TPP Paid   
 2015 Trader's License

### Add Adult Entertainment License

#### Location

Corp Name: J MARKET INC.  
 Trade Name: OK GROCERY  
 Zone Code: 19  
 Phone: 410-225-0414

Block Num: 712-14      Street: MOSHER STREET WEST  
 City: BALTIMORE      State: MD      Zip: 21217

CR Number: 15179687

Portion of Business Used:  
 CONTINUE TO USE AS A PACKAGE GOODS STORE WITH ACCESSORY SALES OF BEER & WINE  
 Restriction:  
 OK HYUN YOU MAY NOT DISPENSE ALCOHOLIC BEVERAGES.

### License Owners

First Name	Last Name	Street	City	State	Zip	Action	Change Owner
JUNG HYOUN	HWANG	3 LANDRUM COURT APT. 301	BALTIMORE	MD	21234	<input type="button" value="Edit"/>	<input type="button" value="Remove Owner"/>
JANG HAK	JIN	2325 HARFORD HILLS ROAD	BALTIMORE	MD	21234	<input type="button" value="Edit"/>	<input type="button" value="Remove Owner"/>

#### Sunday License

License Num:      Cert Num:      Fee:  
 License Date:

Notes.

### Comments

Date	Comment	Action
07/24/2013	07/11/2013 Public Hearing re: Application to transfer ownership. Borad APPROVED the transfer.	<input type="button" value="Delete"/>
08/05/2008	08/05/08 \$100 CONF.FEE PAID IN FULL #64585	<input type="button" value="Delete"/>

License num: WA 002

Address: 712-14 MOSHER STREET WEST

Trade Name: OK GROCERY

Comment:

### Hold Info

Powered by:





**Transfer and Modification of Location**

**Applicant(s): Jung Baik**

**Jen's Place, Inc. T/a Jen's Place**

**1503-05 Light Street**

**Class "BD7" Beer, Wine & Liquor License**

Application to transfer location of a Class "BD7" BWL license presently located at 1501-05 Light Street to 1503-05 Light Street

**Board's Information:**

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

Community Letter(s)/ Memorandum of Understanding: No – Letter from Licensee attorney regarding questions about use.

Posting Date(s): September 7, 2015

SDAT: No Info found

**Board's Decision**

# 503-05 Light St., Baltimore, MD 21230

- nearby Liquor Licenses
- 1501 Light St
- Don't Know Tavern
- Liveat
- Muir's Tavern
- The Rowhouse Grille
- Della Foley's
- 1542 Light St.

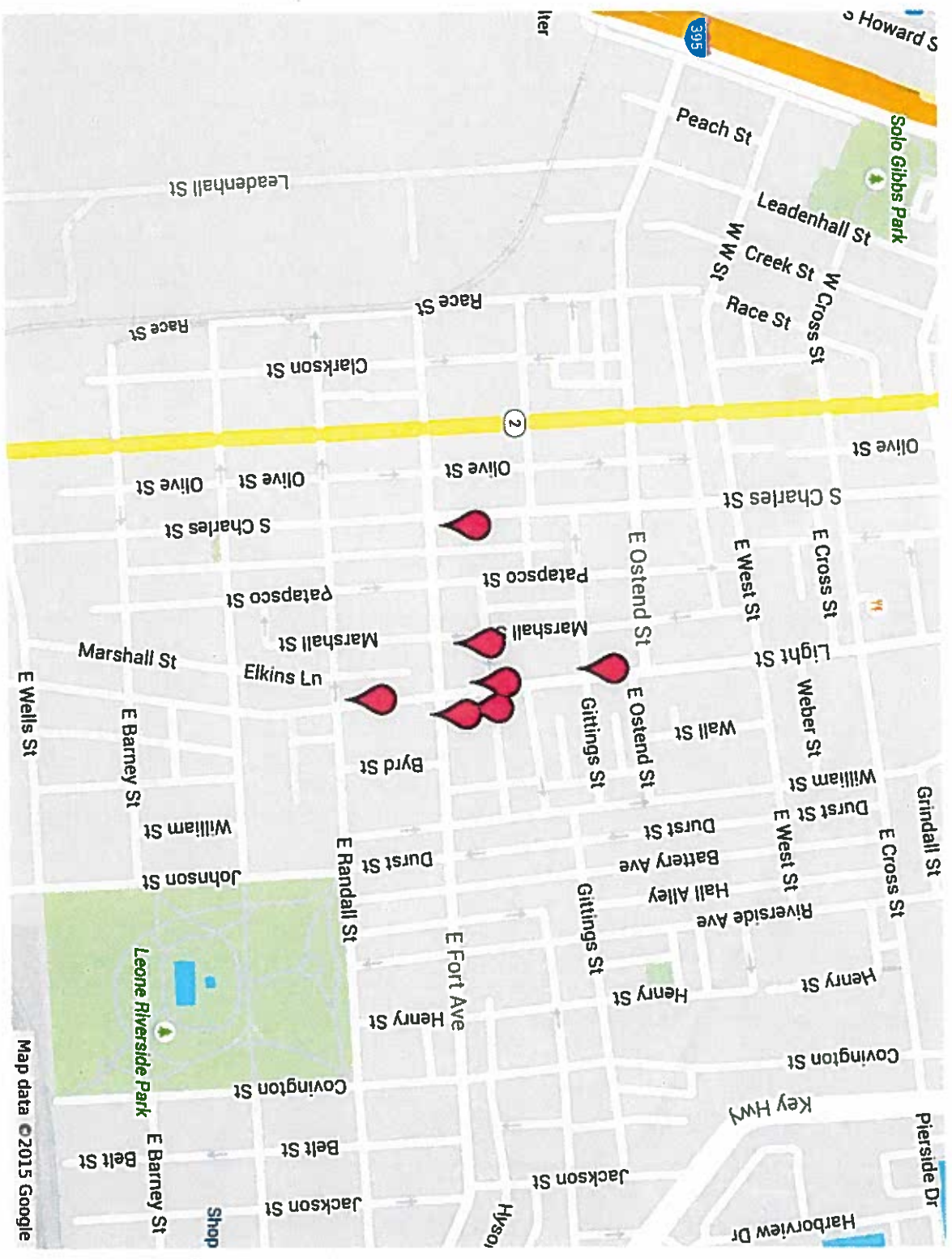
untitled layer

untitled layer

untitled layer

residence at Garden  
 restaurant/separate  
 restaurant and bar/lounge to  
 3-05 Light St.

school #33 ART School 301  
 t *[Signature]*



**Board of Liquor License Commissioners**

For Baltimore City  
 231 E. Baltimore Street, 6<sup>th</sup> Floor  
 Baltimore, Maryland, 21202-3258

**INSPECTORS REPORT - TRANSFERS/NEW APPLICATIONS**

<i>Licensee Information (Trade Name):</i>	Jung R. Baik
<i>Corporation Name:</i>	Jen's Place, Inc.
<i>Location Address:</i>	1503-05 Light St. Baltimore, MD. 21230
<i>License Type:</i>	Class "BD7" Beer, Wine and Liquor <input type="checkbox"/>
<i>Is the establishment open and operating in a safe and sanitary manner? (If not open, not in comments - CLOSED or NOT OPERATING)</i>	Yes <input checked="" type="checkbox"/>
<i>Is the location within 300 feet of Church and/or School?</i>	No <input checked="" type="checkbox"/>
<i>Date Posted?</i>	9/7/2015
<i>Date Removed?</i>	
<i>Are there any other licensed establishments within a two block radius?</i>	Yes <input checked="" type="checkbox"/>

*Other licensed locations - Describe/Note:*

There are six existing licenses in the immediate area as per attached map

*Comments and Follow-up Items(s) (please note any issues or concerns about the location):*

The Garden Restaurant/Lounge requesting to separate the restaurant from the bar and submitted an application to transfer ownership and location of existing license to 1503-05 Light St. The Garden Restaurant will remain at 1501 Lights as a restaurant without a license.

*Insert Photo of Sign and location:*



Inspector Name	Date and Time	
i:\0#.w\baltimore\joann.martin	9/16/2015	5:33:33 PM
Name of Licensee (if present)		
Mr. Lee		

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

CLASS TYPE: LBD7 LICENSE AT THE LOCATION: 1501-05 Light Street IF TRANSFER, LOCATION: 1503-1505 Light St.  
 CORPORATE/LLC/LLP/PARTNERSHIP NAME: JEN'S PLACE, INC. TRADE NAME: Jen's Place  
 ATTORNEY FOR THE APPLICANT: Jay S. Yoo, Esq. ADDRESS: 3440 Ellicott Center Dr # 202, Ellicott City MD 21043 PHONE: 410-465-3606 EMAIL: jayyoolaw@yahoo.com

INDICATE TYPE OF LICENSE APPLICATION: TRANSFER  NEW  EXPANSION OF PREMISES  SUBSTITUTE  AMENDMENT(S)   
 Describe Part of Premises to be Used: First floor front for business Will you offer delivery of food and/or alcohol?  Yes  No  
 Will Live Entertainment be provided?  Yes  No What Kind? \_\_\_\_\_  
 Will Outdoor Table Service Be Provided?  Yes  No Off Premise Catering of Food and Alcohol?  Yes  No

Please note that as per Art. 2B §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 DHCD?  Yes  No If yes, please attach. If no, please give timeframe for obtaining letter of approval: soon after the Board approves this Application (1 month)

WORKER'S COMPENSATION INFORMATION - INSURANCE CARRIER to be determined POLICY OR BINDER #: \_\_\_\_\_

**1. Applicant A**  
Jung R. Baik (443) 717-2144 miwoomori.jb@gmail.com  
(full name) (telephone no.) E-mail (Required)  
5908 Foxhall Manor Dr. Baltimore MD 21228  
(residence) Street City State Zip Code (period of residency in Baltimore City)  
09/1988 Female Rep. of Korea  
(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: 1900 North Bentall St.  
 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**  
 (full name) (telephone no.) 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?

**3. Applicant C**  
 (full name) (telephone no.) 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?

*add: ownership / Structural signature for Act. 1503-05 Light St*

*Jacob [signature] 9/14/15*

1. 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 explanation in adjacent space provided.

Applicant A  B  C

[Redacted]

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  B  C

[Redacted]

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. "Ten Liquors" at ~~5303~~ 5303-5305 York Rd. (from June 2010 to June 2011)

Applicant A  B  C

[Redacted]

4. Has the applicant(s) ever had a liquor license suspended or revoked?  Yes  No If yes, explain in adjacent space.

Applicant A  B  C

[Redacted]

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  No If yes, explain in adjacent space.

Applicant A  B  C

[Redacted]

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  C

[Redacted]

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.

[Redacted]

8. Is the licensed premises presently open and operating?  Yes  No If no, please provide information requested in adjacent space provided.

Closure Date:

[Redacted]

Explanation:

[Redacted]

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.

[Redacted]

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

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
\$30,000.00	Fort Ave Investments, LLC	N/A	\$30,000.00		\$3,000.00	\$27,000.00 due at Closing

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

Name	Address	Phone	Email
Jung R. Baik	5708 Foxhall Manor Dr. Baltimore, MD 21228	(443) 717-2144	milworno ri.jb@gmail.com

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: Jung R. Baik ADDRESS: 5708 Foxhall Manor Dr. Baltimore, MD 21228 TITLE: Resident %OF STOCK HELD RESIDENCE: 100%
- 2) NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_ TITLE: \_\_\_\_\_ %OF STOCK HELD RESIDENCE: \_\_\_\_\_
- 3) NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_ TITLE: \_\_\_\_\_ %OF STOCK HELD RESIDENCE: \_\_\_\_\_
- 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 hereby 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 A

\_\_\_\_\_  
Signature of Applicant B

\_\_\_\_\_  
Signature of Applicant C

State of Maryland: Howard Co. ss

THIS CERTIFIES, THAT ON THE 29<sup>th</sup> OF Aug., 2015  
before the subscriber a notary public of the State of Maryland, personally appeared

Jung Baik  
The applicant (s) names in the foregoing 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.

Jay S. Yoo  
NOTARY PUBLIC  
Howard County, Maryland  
My Commission Expires 04/30/2017  
(Witness my hand and seal)

  
Notary Public

Name and Address of the owners of the premise/landlord: Dong Lee, 1501-1505 Light St, Baltimore, Md 21230 Phone Number: 443-562-6809

STATEMENT OF OWNER OF PREMISES REQUIRED IN CONNECTION WITH ALCOHOLIC BEVERAGES LAW OF MARYLAND

(I, WE) Fort Ave Investment L-LC HEREBY CERTIFY, That (I am, we are) the owner(s) of the property located at 1501-1505 Light St, Baltimore, City with a Zip Code of 21230, 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 conducted, at any and all hours.

(Witness (my, our) hand(s) and seal(s) this 19 day of August in the year of 2015

WITNESS: [Signature]  
 STATE OF MARYLAND  
 THIS CERTIFIES, THAT ON 19 day of August 2015  
 Before the subscriber a notary public of the State of Maryland, personally appeared Dong Sheuk Lee

and acknowledge [Signature] the foregoing statement to be [Signature] act.  
 (Witness my hand) [Signature]  
 Notary Public [Signature]  
 MY COMMISSION EXPIRES OCT 29, 2017

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 present application is to be conducted, certify that the qualifying 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.

Names	Address	Signature	DOB (Month/Year)	Length of time Acquainted with the Applicant(s)
JANE MONTGOMERY	214 E. Fort Ave	[Signature]	11/09/1950	7 yrs.
DAN BARROTT	1444 MARSHALL ST	[Signature]	10-5-44	7 YRS
GARY JACOBS	54 EAST HEATH ST	[Signature]	5-10-83	20(10)7)

FOR OFFICE USE ONLY

DATE FILED: \_\_\_\_\_ NEW/TRANSFER/EXPANSION - \$500.00 PAID:  POSTING DATE: \_\_\_\_\_  
 SUBSTITUTE APPLICATION FEE - \$250.00 PAID  PRINT NAME OF BLLC STAFF \_\_\_\_\_ INITIALS \_\_\_\_\_

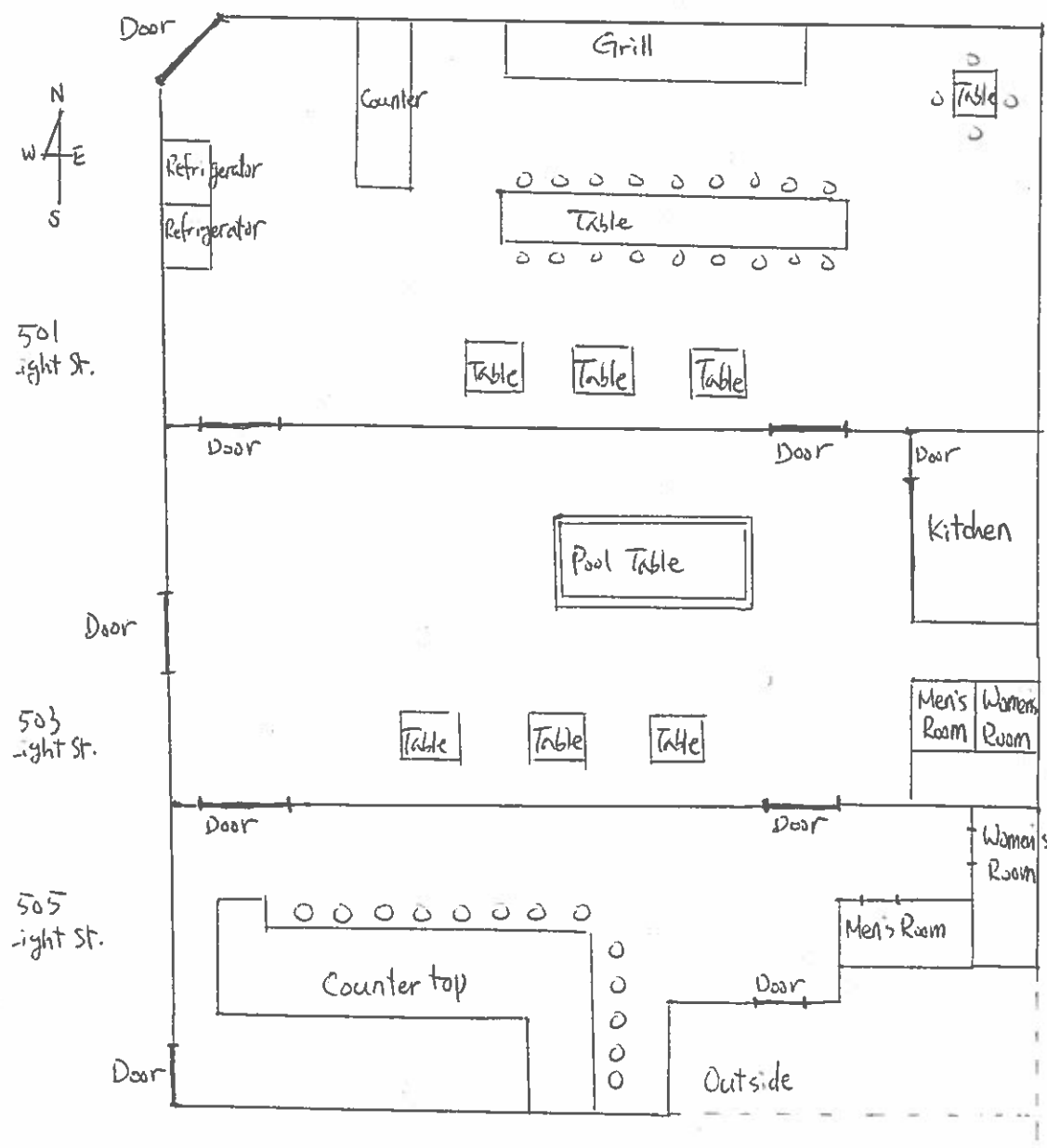
Board of Liquor License Commissioners for the City of Baltimore, 231  
 East Baltimore Street, 6<sup>th</sup> Floor, Baltimore, Maryland 21202  
 Phone: 410-396-4377 Fax: 410-396-4382

Status of Application  
 Approved: Yes  No   
 Date: \_\_\_\_\_  
 BLLC Initials: \_\_\_\_\_  
 Withdrawn: Yes  No   
 Date: \_\_\_\_\_  
 BLLC Initials: \_\_\_\_\_



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.\*

1501 - 1505 Light Street





## 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 221**

Cert Num: **0622**

Fee: **\$1,320.00** Status: **Renewed**

License Date: **5/1/2015**

License Year: **2015**

CR Number: **13379818**

Payment Date: **04-27-15**

2014 - 2015 TPP Paid

2015 Trader's License

Update Info

Click to Start License Renewal

### Add Adult Entertainment License

Add New Adult Entertainment License

#### Location

Corp Name: **FORT AVENUE INVESTEMENTS, LLC**

Trade Name: **GARDEN RESTAURANT & LOUNGE**

Zone Code: **7**

Phone: **410-685-9408**

Block Num: **1501-05**

City: **BALTIMORE**

Street: **LIGHT STREET**

State: **MD**

Zip: **21230**

CR Number: **13379818**

Portion of Business Used:

**FIRST FLOOR FRONT FOR BUSINESS & REAR AND BASEMENT FOR STORAGE**

Restriction:

Edit the License Location Info

Alternate Mailing Address

#### License Owners

First Name	Last Name	Street	City	State	Zip	Action	Change Owner
DONG S.	LEE	9923 ROSE TRAIL	ELLCOTT CITY	MD	21042	Edit	Remove Owner
MICHAEL ALLAN	SEARS	1849 S. CHARLES STREET	BALTIMORE	MD	21230	Edit	Remove Owner

#### Comments

Date	Comment	Action
01/26/2009	01/26/09 \$500 FINE PAID IN LIEU OF 3/5/09 HEARING #65654	Delete
11/20/2008	10/21/08 \$100 CONF.FEE FOR 180 DAY CONF.HELD PAID IN FULL #65201	Delete
11/20/2008	04/08/08 \$100 CONF.FEE PAID IN FULL #62363	Delete

Print History (Print Card)

License num: LBD7 221      Address: 1501-05 LIGHT STREET  
 Trade Name: GARDEN RESTAURANT & LOUNGE

Comment:

Add Comment

**Hold Info**

Powered by:



**Transfer**

**Applicant: Dhruba Onta & Daoud Faddoul**

**BDU Nepal, LLC T/a Bristol Liquors**

**507 S. Broadway**

Class "BD7" Beer, Wine & Liquor License

Application to transfer location of a Class "BD7" BWL license presently located at 507 S. Broadway to 501 S. Broadway

**Board's Information:**

Attached is a copy of the application, letter from the licensee attorney and map.

Community Letter(s)/ Memorandum of Understanding: None – The applicant has been meeting with the community on this item.










Last Inspection Date: May 5, 2015

SDAT: In Good Standing

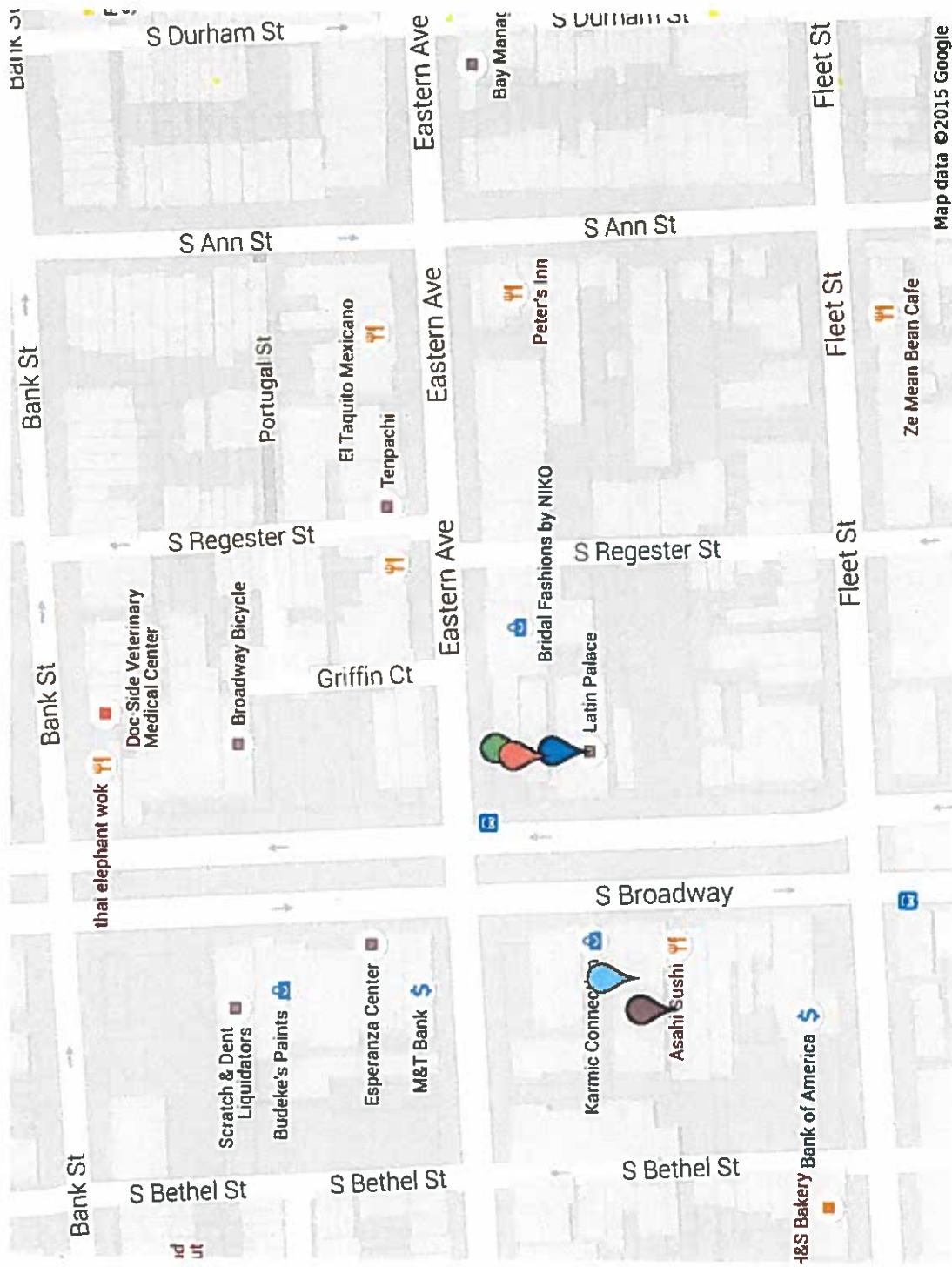
**BOARD'S DECISION:**

# 507 S. Broadway - Bristol Liquors

## Licensed Establishments

-  507 S Broadway
-  Latin Palace
-  Birds of A Feather
-  Carolina's Tex Mex
-  Polish Home Club Inc
-  Asahi Sushi
-  Smashburger
-  Broadway Liquors
-  Louisiana Restaurant

## Liquor License Map



LAW OFFICES OF  
**ABRAHAM L. HURDLE**  
19 E. Fayette Street  
Suite 400  
Baltimore, Maryland 21202

---

410-685-5100  
Fax No: 410-685-5825  
[alh@alhurdlelaw.com](mailto:alh@alhurdlelaw.com)

September 15th, 2015

Board of Liquor License Commissioners  
231 E Baltimore St, #600  
Baltimore, MD 21202

Re: Bristol Liquors Application  
Amendment

To Chairman Neil, Commissioner Hafey, and Commissioner Trotter:

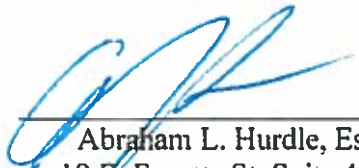
My Clients, BDU Nepal LLC t/a Bristol Liquors, Dhruva Onta and Dauod Faddoul, recently applied to transfer their liquor license from 507 S Broadway, to 501 S Broadway. In completing the application, a mistake was made, and this letter hopes to address that mistake.

The new application asks if the Licensees have ever had any violation. In error my clients answered "NO" when that is incorrect. They were cited late in 2014 for an underage service violation on their BD7 license. the only violation they have incurred on that license.

In an effort to make sure there was no more errors. I researched the file and reviewed the license that is also at that location. On the A License, they were found in violation on two occasions in 2008. Last year's violation was more than six years after the 2008 violation.

Please excuse my clients' mistake on this matter and accept his apologies.

If you have any questions, please let me know and I will do my best to answer them as quickly as possible.



---

Abraham L. Hurdle, Esq.  
19 E. Fayette St, Suite 400  
Baltimore, Maryland  
21202

(410) 685-5100

# Application for Alcoholic Beverages License

## Board of Liquor License Commissioners for Baltimore City

CLASS TYPE: <u>SP</u>	LICENSE AT THE LOCATION: <u>5075 Broadway</u>	IF TRANSFER, LOCATION: <u>501 S Broadway</u>
CORPORATE/LLC/LLP/PARTNERSHIP NAME: <u>BDU Nepal, LLC</u>	TRADE NAME: <u>Bright Liquors</u>	
ATTORNEY FOR THE APPLICANT: <u>A. Hurdle</u>	ADDRESS: <u>19 E Fayette St</u>	PHONE: <u>410 685 5100</u> EMAIL: <u>alcoholhurdle@comcast.com</u>

INDICATE TYPE OF LICENSE APPLICATION: TRANSFER  NEW  EXPANSION OF PREMISES  SUBSTITUTE  AMENDMENT(S)

Describe Part of Premises to be Used: First Floor, Basement, Storage Will you offer delivery of food and/or alcohol?  Yes  No

Will Live Entertainment be provided?  Yes  No What Kind? \_\_\_\_\_

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)(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 DHCO?  Yes  No If yes, please attach. If no, please give timeframe for obtaining letter of approval: permitted, use will apply and represent

WORKER'S COMPENSATION INFORMATION - INSURANCE CARRIER: Family Business POLICY OR BINDER #: \_\_\_\_\_

**1. Applicant A**

Dhruba Onta 443 470 4640 ontanuzi@hotmail.com  
 (full name) (telephone no.) E-mail (Required)  
Dhruba 610 Gardner Towson MD 21231 Not  
 (residence) Street City State Zip Code (period of residency in Baltimore City)  
2/7/63 M Nepal  
 (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**

DAOUD FADDOUC 443 570 9261 daoudfaddou@mms.com  
 (full name) (telephone no.) E-mail (Required)  
515 S Broadway Baltimore MD 21231 10 years  
 (residence) Street City State Zip Code (period of residency in Baltimore City)  
2/19/70 Male Israel  
 (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?

**3. Applicant C**

\_\_\_\_\_  
 (full name) (telephone no.) 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?

LL  
 Name and Address of the owners of the premise/landlord: BAHAR LLC 5015 Broadway  
 Phone Number: 302 218 4279

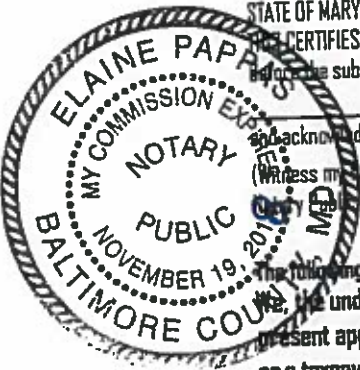
STATEMENT OF OWNER OF PREMISES REQUIRED IN CONNECTION WITH ALCOHOLIC BEVERAGES LAW OF MARYLAND

(I/WE) BAHAR LLC HEREBY CERTIFY, That (I am, we are) the owner(s) of the property located at 5015 BROADWAY, Baltimore, City with a Zip Code of 21231, 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 conducted, at any and all hours.

(Witness (my, our) hand(s) and seal(s) this 28 day of Aug in the year of 2015

WITNESS: Abeth Huddle  
 STATE OF MARYLAND CERTIFIES, THAT ON 28th day of August, 2015  
 before me the subscriber a notary public of the State of Maryland, personally appeared Bumdad Bahar, member of Bahar, LLC

and acknowledge the execution of the foregoing statement to be Elaine Pappas act.  
 (Witness my hand and seal)



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 present application is to be conducted, certify that the qualifying 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.

Names	Address	Signature	DOB (Month/Year)	Length of time Acquainted with the Applicant(s)
<u>Kevin Wesner</u>	<u>1215 Dockside Cir</u>	<u>Kevin Wesner</u>	<u>5-21-70</u>	<u>7 yrs</u>
<u>SARAH FLORA</u>	<u>3120 ELLIOTT ST</u>	<u>Sarah Flora</u>	<u>7/16/1980</u>	<u>3 yrs</u>
<u>Jeremy Arroyo</u>	<u>1228 Dockside Cir.</u>	<u>Jeremy Arroyo</u>	<u>9-3-77</u>	<u>5 yrs</u>

FOR OFFICE USE ONLY

DATE FILED: \_\_\_\_\_ NEW/TRANSFER/EXPANSION - \$500.00 PAID:  POSTING DATE: \_\_\_\_\_  
 SUBSTITUTE APPLICATION FEE - \$250.00 PAID  PRINT NAME OF BLLC STAFF \_\_\_\_\_ INITIALS \_\_\_\_\_

Status of Application  
 Approved: Yes  No   
 Date: \_\_\_\_\_  
 BLLC Initials: \_\_\_\_\_  
 Withdrawn: Yes  No   
 Date: \_\_\_\_\_  
 BLLC Initials: \_\_\_\_\_

Board of Liquor License Commissioners For the City of Baltimore, 231  
 East Baltimore Street, 6<sup>th</sup> Floor, Baltimore, Maryland 21202  
 Phone: 410-396-4377 Fax: 410-396-4382



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

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

change of location  
From 507 S. Broadway  
501 S. Broadw

11. 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.)

- 1) NAME: Dhruba Onta ADDRESS: 610 Goucher TITLE: 99% interest, member % OF STOCK HELD RESIDENCE: managing member
- 2) NAME: Daoud Faddoul ADDRESS: 5155 Broadway TITLE: 1% % OF STOCK HELD RESIDENCE: nonmanaging member
- 3) NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_ TITLE: \_\_\_\_\_ % OF STOCK HELD RESIDENCE: \_\_\_\_\_
- 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 hereby 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]  
Signature of Applicant A

[Signature]  
Signature of Applicant B

\_\_\_\_\_  
Signature of Applicant C

State of Maryland: Baltimore ss  
THIS CERTIFIES, THAT ON THE 28<sup>th</sup> OF August 2015  
before the subscriber a notary public of the State of Maryland, personally appeared  
Dhruba Onta & Daoud Faddoul

The applicant (s) names in the foregoing application, and made oath in due form of law that the statement therein are true to the best of their knowledge and belief.

Dorothea Looco  
Notary Public



(Witness my hand and seal)

1. 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 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.

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  B  C

507 S Broadway  
transfer of location

4. Has the applicant(s) ever had a liquor license suspended or revoked?  Yes  No If yes, explain in adjacent space.

Applicant A  B  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  No If yes, explain in adjacent space.

*No Business*

Applicant A  B  C

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  C

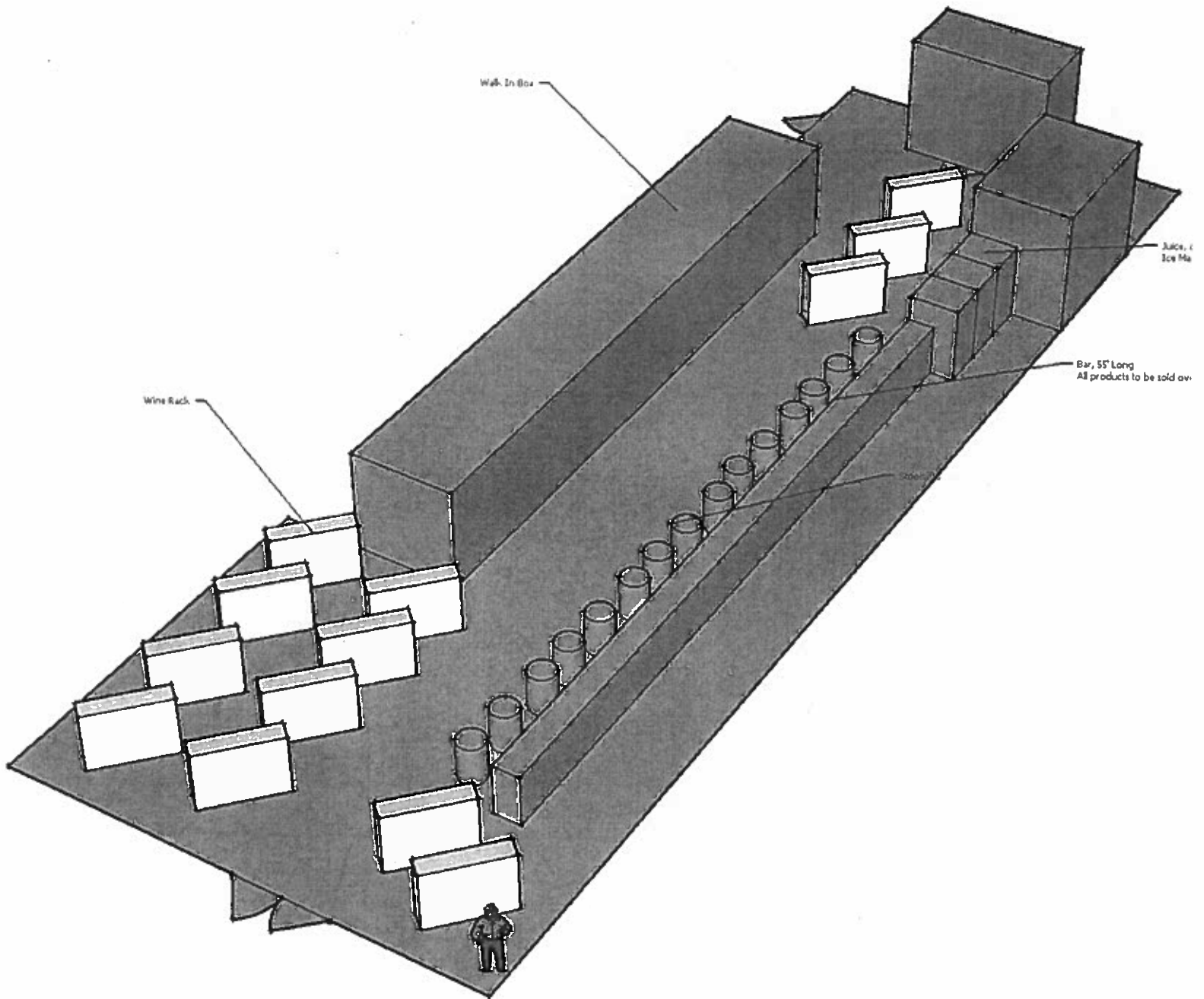
7. Is there now, or will there be, during the continuance of the license applied for, any other person financial interested in said license or business to be conducted thereunder?  Yes  No If yes, explain in the adjacent space provided.

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.

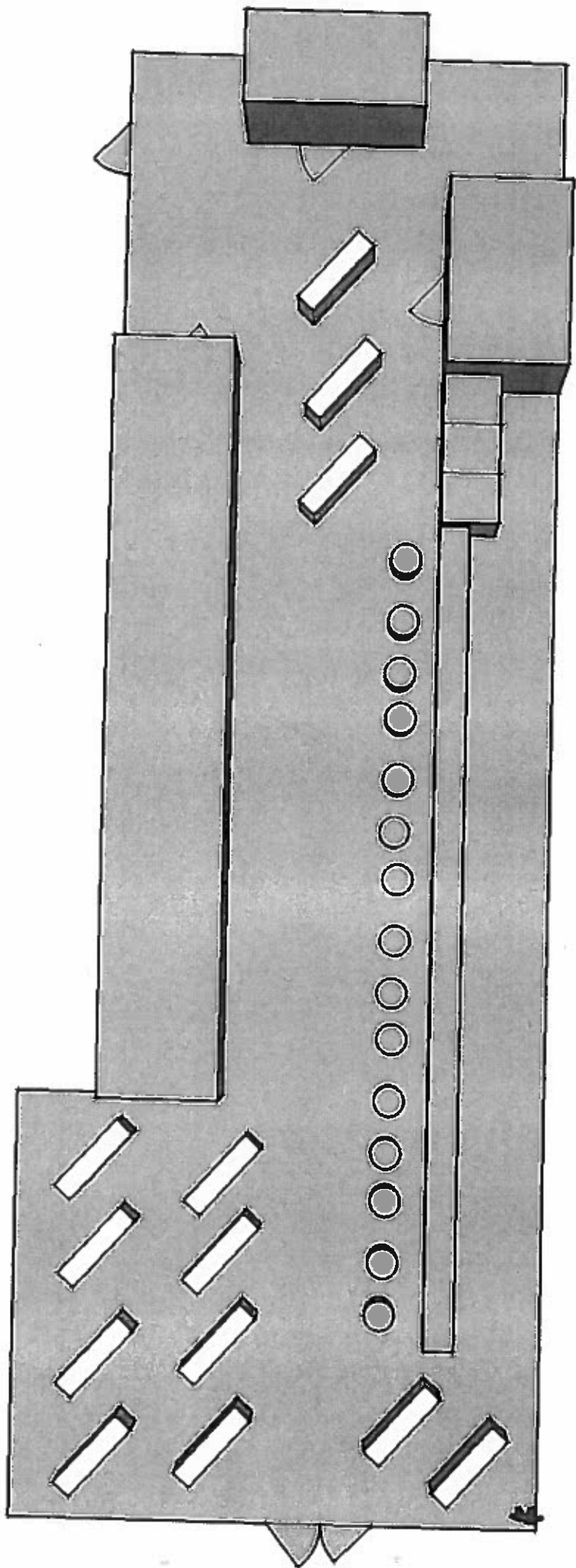


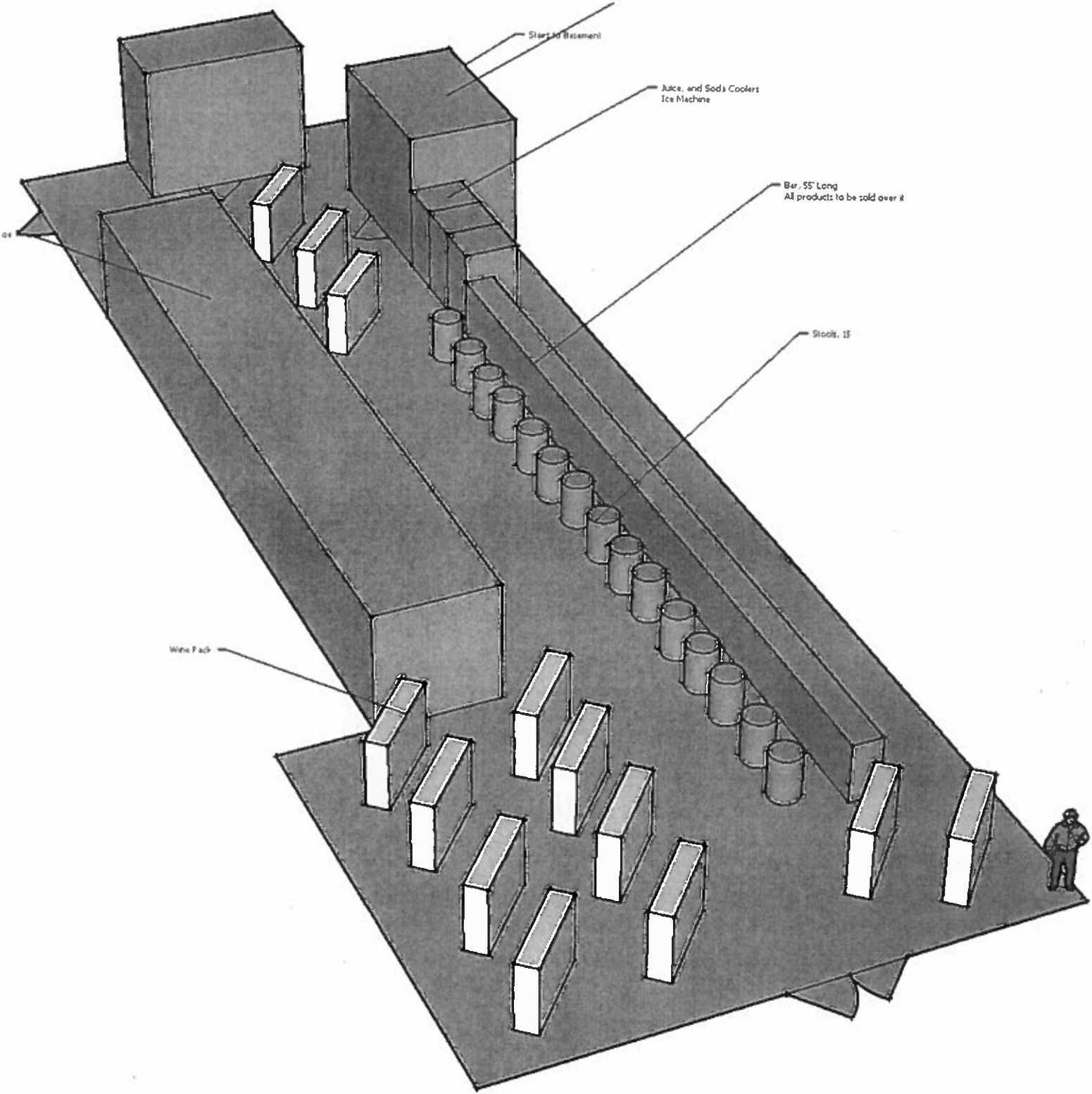
Walk-In Box

Wine Rack

Bar, 55' Long  
All products to be sold over

Juice &  
Ice Ma





Start-Up Basement

Juice, and Soda Coolers  
Ice Machine

Bar, 55' Long  
All products to be sold over it

Stools, 15

Wine Rack



## Liquor Board System

Version 1.0

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

### License Detail





#### License Info

License Num: **LBD7 266**Cert Num: **0726**Fee: **\$1,320.00**Status: **Renewed**License Date: **5/1/2015**License Year: **2015**CR Number: **12473243**Payment Date: **04-29-15**2014 - 2015 TPP Paid  **Y**2015 Trader's License  **N**



### Add Adult Entertainment License

#### Location

Corp Name: **BDU NEPAL LLC**Trade Name: **BRISTOL LIQUORS**Zone Code: **11**Phone: **410-732-8394**Block Num: **507**City: **BALTIMORE**Street: **BROADWAY SOUTH**State: **MD**Zip: **21231**CR Number: **12473243**

Portion of Business Used:

**USE PORTION OF PREMISES 1ST FLOOR AS A LIQUOR STORE AND TAVERN**

Restriction:



#### License Owners

First Name	Last Name	Street	City	State	Zip	Action	Change Owner
DAOUD	FADDOUL	515 SOUTH BROADWAY	BALITMORE	MD	21231	<input type="button" value="Edit"/>	<input type="button" value="Remove Owner"/>
DHRUBA RAJ	ONTA	610 GOUCHER BLVD	TOWSON	MD	21286	<input type="button" value="Edit"/>	<input type="button" value="Remove Owner"/>

#### Comments

Date	Comment	Action
02/09/2015	2/2/2015 Alcohol Awareness Certified John S Murray expires 2/2/2019	<input type="button" value="Delete"/>
02/03/2015	01/15/15 Public Hearing re: Liquor Board Fine, PAID \$375.00, invoice #95586	<input type="button" value="Delete"/>
04/22/2014	03/20/2014 Public Hearing re: Application to transfer ownership & Location of a Class BD7 BWL presently located at 300 S oldhams Street to 507 S Broadway , tranfer of ownership is from secured creditor. Board APPROVED the transfer	<input type="button" value="Delete"/>
02/11/2014	10/31/2013 Public Hearing re: Application to transfer ownership and location from Secures Creditor presently located at 300 Oldham Street to 3638 S hanover St. Board Denied the transfer	<input type="button" value="Delete"/>
03/19/2012	LICENSEE WANTS TO SELL LICENSE & BUILDING AND CAN BE REACHED AT 239-455-8186.	<input type="button" value="Delete"/>
10/06/2011	9/29/2011 Public Hearing re: Request hardship extension under the provisions of Article 28 section 10-504(d). GRANTED 180day extension.	<input type="button" value="Delete"/>
07/13/2009	06/25/09 \$100 CONF. FOR HARDSHIP EXTENSION.DECISION: EXTENSION GRANTED. #69489	<input type="button" value="Delete"/>
07/13/2009	06/24/09 \$500 (SALE TO MINOR ) PAID IN LIEU OF 7/23/09 HEARING #69456	<input type="button" value="Delete"/>
02/24/2006	02/23/06 Transfer/Conf. re: Applicatio to transfer ownership,presently in the name of Lawrence Elberson,L.N.L.,Enterprises, Inc../a Larry's Hideaway, DECISION: APPROVED \$100 PAID #55003	<input type="button" value="Delete"/>

License num: LBD7 266                      Address: 507 BROADWAY SOUTH  
 Trade Name: BRISTOL LIQUORS

Comment:

**Hold Info**

Powered by:



**Transfer and Change of License Class**

**Applicant(s): Georgios Aligeorgas**

**Harbor East Venture, LLC T/a trade name pending**

**1010 Aliceanna Street**

**Class "BD7" Beer, Wine & Liquor License**

**Application to change a Class "B" BWL to a Class "BD7"**

**Board's Information:**

Attached is a copy of the application and map.

This license was previously a BD7 and was downgraded to class B the applicant has requested to change the license back to BD7

**Community Letter(s)/ Memorandum of Understanding: None**

**Last Inspection Date(s): April 2, 2015**

**SDAT: In Good Standing**

**BOARD'S DECISION:**



Entity Name: HARBOR EAST VENTURE, LLC

Department ID: W14037147

General Information	Amendments	Personal Property	Certificate of Status
---------------------	------------	-------------------	-----------------------

Principal Office (Current):	1010 ALICEANNA ST BALTIMORE, MD 21202
Resident Agent (Current):	STEVEN A. THOMAS, ESQ. STE. 1100 100 LIGHT ST. BALTIMORE, MD 21202
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:	03/29/2011
State of Formation:	MD
Stock/Nonstock:	N/A
Close/Not Close:	Unknown

# 1010 Aliceanna Street

## Licensed Establishments

- 1010 Aliceanna St
- The Oceanaire Seafood Room
- Ouzo Bay
- Cinghiale
- Lebanese Taverna
- Four Seasons Hotel Baltimore
- Azumi
- Fleming's Prime Steakhouse & Wine Bar
- Roy's
- The James Joyce Pub
- Baltimore Marriott Waterfront
- Hilton Garden Inn Baltimore Inner Harbor

## Liquor License Map



# Application for Alcoholic Beverages License

## Board of Liquor License Commissioners for Baltimore City

CLASS TYPE: _____	LICENSE AT THE LOCATION: <u>1010 Aliceanna St</u>	IF TRANSFER, LOCATION: _____
CORPORATE/LLC/LLP/PARTNERSHIP NAME: <u>Harbor East Venture LLC</u>		TRADE NAME: <u>Pending</u>
ATTORNEY FOR THE APPLICANT: _____	ADDRESS: _____	PHONE: _____ EMAIL: _____

INDICATE TYPE OF LICENSE APPLICATION: TRANSFER  NEW  EXPANSION OF PREMISES  SUBSTITUTE  AMENDMENT(S)  B to BD 7

Describe Part of Premises to be Used: 1st & 2nd FL Will you offer delivery of food and/or alcohol?  Yes  No

Will Live Entertainment be provided?  Yes  No What Kind? Dancing

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)(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 DHCD?  Yes  No If yes, please attach. If no, please give timeframe for obtaining letter of approval: \_\_\_\_\_

WORKER'S COMPENSATION INFORMATION - INSURANCE CARRIER MID Atlantic POLICY OR BINDER #: 30 WICE61870

**1. Applicant A**

Georgios A. Georgas  
(full name) (telephone no.) E-mail (Required)

117 W. Conway St # R60 Baltimore MD 21201  
(residence) Street City State Zip Code (period of residency in Baltimore City)

2-15-58 M Greece 25 yrs  
(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**

\_\_\_\_\_  
(full name) (telephone no.) 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?

**3. Applicant C**

\_\_\_\_\_  
(full name) (telephone no.) 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?

1. 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 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.

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  B  C

*current license*

4. Has the applicant(s) ever had a liquor license suspended or revoked?  Yes  No If yes, explain in adjacent space.

Applicant A  B  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  No If yes, explain in adjacent space.

Applicant A  B  C

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  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.

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.

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
N/A						

11. 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.)

✓ 1) NAME: PETE KORONOS ADDRESS: 514.5 CHARLES ST TITLE: SO %OF STOCK HELD RESIDENCE:

2) NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_ TITLE: \_\_\_\_\_ %OF STOCK HELD RESIDENCE:

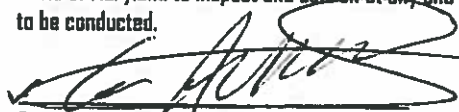
3) NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_ TITLE: \_\_\_\_\_ %OF STOCK HELD RESIDENCE:

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 hereby 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 A

9-1-015

Signature of Applicant B

Signature of Applicant C

State of Maryland: County of Harford SS

THIS CERTIFIES, THAT ON THE 1st OF September 2015

before the subscriber a notary public of the State of Maryland, personally appeared

George Alegeorgas

The applicant (s) names in the foregoing 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



12-14-18

Notary Public -

(Witness my hand and seal)

STATEMENT OF OWNER OF PREMISES REQUIRED IN CONNECTION WITH ALCOHOLIC BEVERAGES LAW OF MARYLAND

(I, WE) x JOHN PATENAKIS HEREBY CERTIFY, That (I am, we are) the owner(s) of the property located at 1010 ALGERMANA ST., Baltimore, City with a Zip Code of 21202, 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 conducted, at any and all hours.

(Witness (my, our) hand(s) and seal(s) this 26 day of 8 in the year of 2015

WITNESS: Pat Horner

STATE OF MARYLAND  
THIS CERTIFIES, THAT ON 26<sup>th</sup> day of August 2015  
Before the subscriber a notary public of the State of Maryland, personally appeared

JOHN PATENAKIS  
and acknowledge the execution of the foregoing statement to be True act.

(Witness my hand and seal)  
Notary Public - John Z. Pulley  
12-14-18

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 present application is to be conducted, certify that the qualifying 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.

Names	Address	Signature	DOB (Month/Year)	Length of time Acquainted with the Applicant(s)
<u>JASON FIUZZA</u>	<u>403 ANGLESEA ST BALTIMORE, MD 21224</u>	<u>[Signature]</u>	<u>6/16/81</u>	<u>8 yrs</u>
<u>Alexander Smith</u>	<u>675 S. President St BALTIMORE, MD 21203</u>	<u>[Signature]</u>	<u>8/18/84</u>	<u>8 yrs</u>
<u>Brandon Smith</u>	<u>1322 ALGERMANA ST BALTIMORE MD</u>	<u>[Signature]</u>	<u>3/1/86</u>	<u>2 yrs</u>

FOR OFFICE USE ONLY

DATE FILED: 9-14-15 NEW/TRANSFER/EXPANSION - \$500.00 PAID:  POSTING DATE: \_\_\_\_\_

SUBSTITUTE APPLICATION FEE - \$250.00 PAID  PRINT NAME OF BLLC STAFF \_\_\_\_\_ INITIALS \_\_\_\_\_

Board of Liquor License Commissioners For the City of Baltimore, 231  
East Baltimore Street, 6<sup>th</sup> Floor, Baltimore, Maryland 21202  
Phone: 410-396-4377 Fax: 410-396-4382

Status of Application	
Approved: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Date: _____	
BLLC Initials: _____	
Withdrawn: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Date: _____	
BLLC Initials: _____	

have a professionally drafted rendering, please attach it to the application.\*

*To be Provided*

**New Application**

**Applicant(s): Christopher Nwaeze & Musibau Shittu**

**C and G Group, LLC T/a Posh-Mix**

**8-14 Park Avenue**

**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

**Board's Information:**

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

**Community Letter(s)/ Memorandum of Understanding: None**

**Posting Date(s):** This has been postponed several times – application filed in February 2015

**SDAT: Not in Good Standing**

**BOARD'S DECISION:**



Entity Name: C AND G GROUP, LLC

Department ID: W16145443

General Information

Amendments

Personal Property

Certificate of Status

**Principal Office (Current):**

8-14 PARK AVE  
BALTIMORE, MD 21201

**Resident Agent (Current):**

MUSIBAU SHITTU  
958 JAK ST  
BALTIMORE, MD 21225

**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:**

10/22/2014

**State of Formation:**

MD

**Stock/Nonstock:**

N/A

**Close/Not Close:**

Unknown

**Entity Name:** C AND G GROUP, LLC

**Department ID:** W16145443

General Information

Amendments

Personal Property

Certificate of Status

**Principal Office (Current):**

8-14 PARK AVE  
BALTIMORE, MD 21201

**Resident Agent (Current):**

MUSIBAU SHITTU  
958 JAK ST  
BALTIMORE, MD 21225

**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:**

10/22/2014

**State of Formation:**

MD

**Stock/Nonstock:**

N/A

**Close/Not Close:**

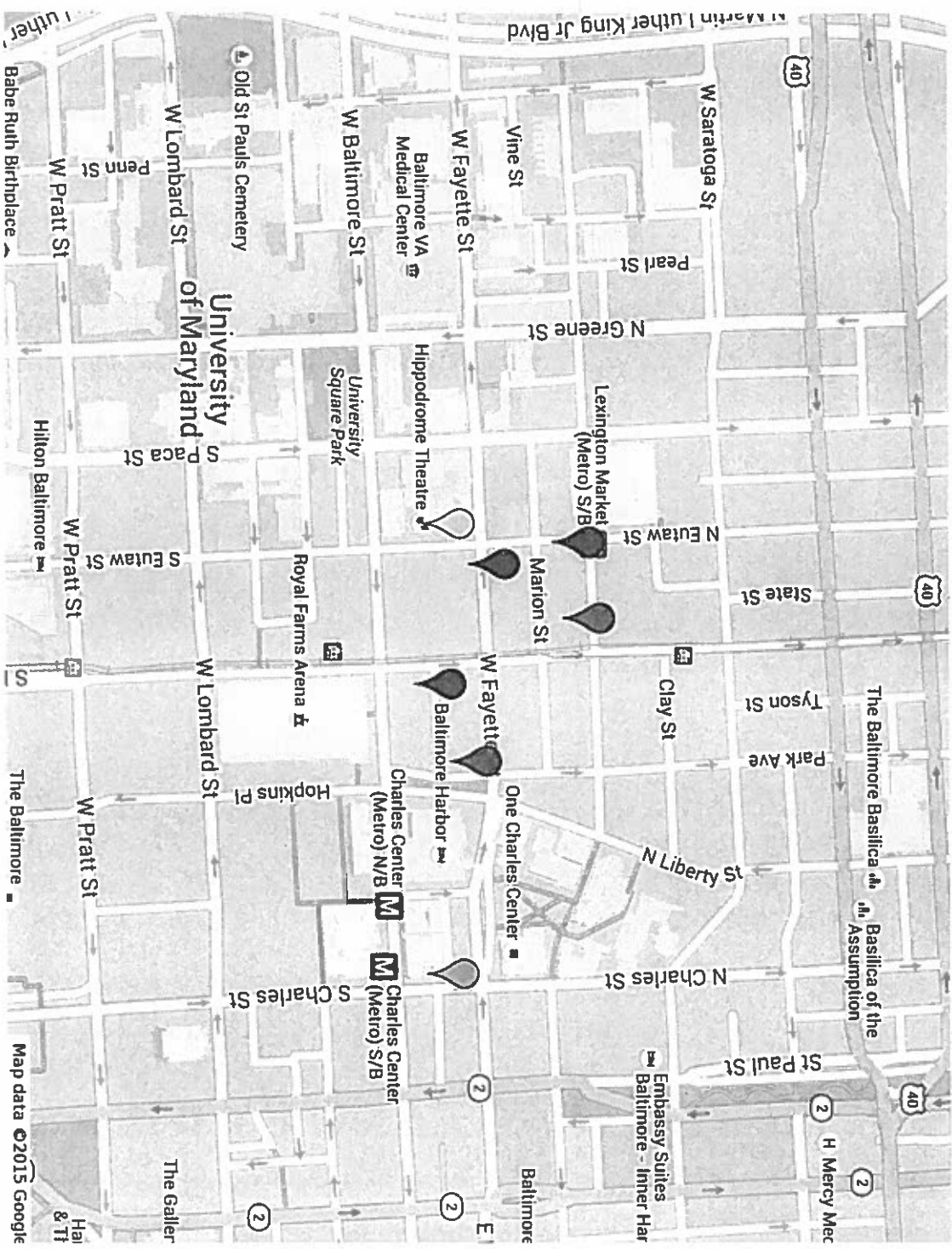
Unknown

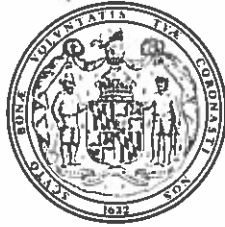
# 14 Park Ave

## Untitled layer

- 8 Park Ave
- B & O American Brasserie
- Howard Liquors
- Hippodrome Theatre
- Eutaw Liquor Store
- Alewife Baltimore
- Rite Aid Pharmacy

## Posh Mix





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

Zoning District \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Date: \_\_\_\_\_  
 ZONING DIVISION \_\_\_\_\_

Department of Housing and  
 Community Development

**Alcoholic Beverage License Application**

Application for a Class B License at the location 8-14 Park Avenue  
 Corporate/LLC name C and G Group, LLC Trade name POSH - MIX  
 Attorney for Applicant (s) Mel Kodenski Address: 19 E. Fayette St. Ste 400 Phone: 410 685-5100

To the Board of Liquor License Commissioners for Baltimore City:

Application is made by the undersigned for the above license under the provisions of Article 2B of the Annotated Code of Maryland as amended, and the following information is submitted as required by the Article:

**I. Applicant(s)**

(A) Name: CHRISTOPHER NWAEEZE  
 Address: 15646 Twin Valley Ct, Silver Spring, MD Zipcode: 20906  
 Home phone number 301 924 1883 Date of birth 04-29-77 Sex M  
 Place of birth Nigeria How long at current address? 9 YRS.  
 Have you been a resident or taxpayer of Baltimore City for 2 years preceding the filing of this application? No  
 City resident: Yes \_\_\_ No X or Address of property on which tax is paid in your individual name: \_\_\_\_\_

Have you ever been convicted of a felony? Yes \_\_\_ No X Been found guilty of violation of alcoholic beverage laws? Yes \_\_\_ No X Been found guilty of violating gambling laws? Yes \_\_\_ No \_\_\_ Been found guilty of any offense against the laws of the United States? Yes \_\_\_ No X If yes, provide details: \_\_\_\_\_

What financial interest do you have in the business to be conducted under this license? 100%

Are you financially interested in any other alcoholic beverage business for which a license has been applied, granted or issued? Yes X No \_\_\_ Do you have any indebtedness or other financial obligations to any manufacturer, brewer, distiller, or wholesaler at the time of making this application? Yes \_\_\_ No \_\_\_ Have you previously held a license for the sale of alcoholic beverages? Yes X No \_\_\_ If yes, state when and where: 10 S. Calvert St. Sept 2012 - present

Is there anyone else who has a financial interest in this license or the business to be conducted under it? Yes \_\_\_ No X

If granted a license, will you incur any indebtedness or financial obligation to any manufacturer, brewer, distiller or wholesaler other than for the purchase of alcoholic beverages? Yes \_\_\_ No X

If granted a license, will you conform to all laws and regulations relating to the business in which you propose to engage? (Yes) or No \_\_\_ Do you consent to the Board of Liquor License Commissioners being furnished with a copy of your arrest record, if any? Yes X No \_\_\_

(B) Name: MUSIBAU O SHITTU  
 Address: 958 JAK ST, BALTIMORE MD Zipcode: 21225  
 Home phone number 240 446 2794 Date of birth 03-06-73 Sex MALE  
 Place of birth NIGERIA How long at current address? 2 YRS

Have you been a resident or taxpayer of Baltimore City for 2 years preceding the filing of this application? Yes  
 City resident: Yes X No \_\_\_ or Address of property on which tax is paid in your individual name: \_\_\_\_\_

958 JAK ST BALTIMORE MD 21225

Have you ever been convicted of a felony? Yes \_\_\_ No X Been found guilty of violation of alcoholic beverage laws? Yes \_\_\_ No X Been found guilty of violating gambling laws? Yes \_\_\_ No \_\_\_ Been found guilty of any offense against the laws of the United States? Yes \_\_\_ No X If yes, provide details: \_\_\_\_\_

What financial interest do you have in the business to be conducted under this license? NONE

Are you financially interested in any other alcoholic beverage business for which a license has been applied, granted or issued? Yes X No \_\_\_ Do you have any indebtedness or other financial obligations to any manufacturer, brewer, distiller, or wholesaler at the time of making this application? Yes \_\_\_ No X Have you previously held a license for the sale of alcoholic beverages? Yes X No \_\_\_ If yes, state when and where: 10 S. Calvert St. Sept 2012 - present

Is there anyone else who has a financial interest in this license or the business to be conducted under it? Yes \_\_\_ No X

If granted a license, will you incur any indebtedness or financial obligation to any manufacturer, brewer, distiller or wholesaler other than for the purchase of alcoholic beverages? Yes \_\_\_ No X

If granted a license, will you conform to all laws and regulations relating to the business in which you propose to engage? (Yes) or No \_\_\_ Do you consent to the Board of Liquor License Commissioners being furnished with a copy of your arrest record, if any? Yes X No \_\_\_

Office use only: New B-BW live entertainment, off-premises catering

(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 Baltimore City for 2 years preceding the filing of this application? \_\_\_\_\_  
 City resident: Yes \_\_\_ No \_\_\_ or Address of property on which tax is paid in your individual name: \_\_\_\_\_

Have you ever been convicted of a felony? Yes \_\_\_ No \_\_\_ Been found guilty of violation of alcoholic beverage laws? Yes \_\_\_ No \_\_\_  
 Been found guilty of violating gambling laws? Yes \_\_\_ No \_\_\_ Been found guilty of any offense against the laws of the United States? Yes \_\_\_ No \_\_\_ If yes, provide details: \_\_\_\_\_

What financial interest do you have in the business to be conducted under this license? \_\_\_\_\_

Are you financially interested in any other alcoholic beverage business for which a license has been applied, granted or issued? Yes \_\_\_ No \_\_\_ Do you have any indebtedness or other financial obligations to any manufacturer, brewer, distiller, or wholesaler at the time of making this application? Yes \_\_\_ No \_\_\_ Have you previously held a license for the sale of alcoholic beverages? Yes \_\_\_ No \_\_\_ If yes, state when and where: \_\_\_\_\_

Is there anyone else who has a financial interest in this license or the business to be conducted under it? Yes \_\_\_ No \_\_\_

If granted a license, will you incur any indebtedness or financial obligation to any manufacturer, brewer, distiller or wholesaler other than for the purchase of alcoholic beverages? Yes \_\_\_ No \_\_\_

If granted a license, will you conform to all laws and regulations relating to the business in which you propose to engage? Yes or No Do you consent to the Board of Liquor License Commissioners being furnished with a copy of your arrest record, if any? Yes \_\_\_ No \_\_\_

2. Address of the place to be licensed 8 PARK AV BALTIMORE MD Zipcode 21201

Phone number 410-963-8577 Part of the building in which the business will be conducted. First Floor for business and basement and 2nd Floor for storage

Will you provide live entertainment? YES What kind? DJ, BAND, JAZZ, dancing

Outdoor table service? No Off premises catering of food and alcohol? Yes

Will you offer delivery of food and/or alcohol? Yes

The name, address and telephone number of the owner of the real property in which the business is to be operated Georgia C. Marudas, 9 Wendover Rd, Balto, MD 21218

What merchandise will be handled in connection with sale of alcoholic beverages? Food

I submit herewith a statement duly executed and acknowledged by the owner of the premises in which the business is to be conducted, assenting to the granting of the license applied for, authorizing the Comptroller, the 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 Baltimore City, 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 conducted, at any and all hours. I also submit herewith, and as a part hereof, a certificate signed by at least three citizens whom I know to be owners of real estate and registered voters of the city in which the business is to be conducted, containing the voting residence of each and the real estate situated in the city where the business is to be conducted of which each is the owner, and setting forth the length of time each has been acquainted with the applicant; and certifying that they have examined this application, that they have good reason to believe that all of the statements contained herein are true, that they are of the opinion that the applicant is a suitable person to obtain the license applied for, and that they are familiar with the premises upon which the proposed business is to be conducted and believe them suitable for the conduct of the business of a retail dealer in alcoholic beverages.

Extract from Law - If any signed statement, report, affidavit or oath, required under any of the provisions of this Article shall contain any false statement, the offender shall be deemed guilty of perjury, and upon conviction thereof, shall be subject to the penalties provided by law for that crime.

[Signature]  
 Applicant

AFFIDAVIT

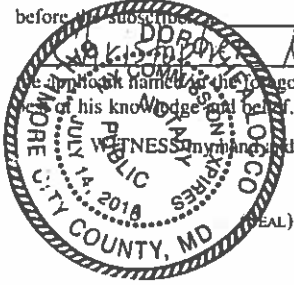
STATE OF MARYLAND, City of Baltimore,

THIS CERTIFIES, That on the 10 day of November, 2014

before me, subscribed Notary Public of the State of Maryland, personally appeared Nwaeze and Musibay O. Shifu

the applicant named in the foregoing application, and made oath in due form of law that the statements therein are true to the best of his knowledge and belief.

WITNESS my hand and official seal.



[Signature]

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

I We HEREBY CERTIFY, That I am we are the owner(s) of property known as 8-14 Park Ave

named in the application made by Christopher Nwaeze and Musibau D. Shittu  
to the Board of Liquor License Commissioners of Baltimore City, under the Alcoholic Beverages Law of Maryland, for a

B B, W, L  
License expiring April 30, 2015; that I We assent to the granting of the license applied for, and that I We 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 Baltimore City 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 conducted, at any and all hours.

WITNESS my our hand(s) and seal(s) this 14th day of NOVEMBER, 2014

WITNESS: [Signature] [Signature]  
Georgia C. Marudas

Address Name, Address, and Phone Number of Property Owner

print name: GEORGIA C MARUDAS  
9 WENDOVER Rd  
address: Baltimore MD 21218

**READ CAREFULLY**

(The following certificate must be signed by at least THREE CITIZENS.)

We, the undersigned reputable citizens, certify: phone: 410-889-3328

- (1) That we are the owners of real estate situated in the City of Baltimore.
- (2) 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 with applicant
<u>[Signature]</u>	Voting Residence <u>5559 MIDWOOD AVE Balto MD 21212</u>	<u>6 YRS</u>
<u>Edward PETERS</u>	Property Owner <u>5559 MIDWOOD AVE Baltimore MD 21212</u>	
<u>[Signature]</u>	Voting Residen. <u>520 PATAPSCO AV Baltimore MD 21225</u>	
<u>PAUL ROTHENBERG</u>	Property Owner <u>520 PATAPSCO AV Baltimore MD 21225</u>	<u>8 YRS</u>
<u>Jose R Rodriguez</u>	Voting Residence <u>1709 BYRD ST BALTO MD 21230</u>	<u>7 YRS</u>
<u>Jose R Rodriguez</u>	Property Owned <u>1709 BYRD ST BALTO MD 21230</u>	<u>7 YRS</u>
<u>DERRICK Chase</u>	Voting Residence <u>4414 Eastway Balto MD 21218</u>	<u>2 YRS</u>
<u>Shereese Chase</u>	Property Owned <u>4414 Eastway Balto MD 21218</u>	<u>2 YRS</u>
<u>Derrick Chase</u>	Voting Residence <u>4414 Eastway Balto MD 21218</u>	<u>2 YRS</u>
	Property Owned <u>4414 Eastway Balto MD 21218</u>	

(The names and addresses of the signers must be printed or typewritten above their signatures)

FOR CLUBS, CORPORATIONS, PARTNERSHIPS AND ASSOCIATIONS

Name of Corporation, Partnership, Club or Association C and G Group, LLC  
Trade Name Pash-Mix  
Address 8-14 Park Avenue

Names of all officers or partners:

Christopher Nwaeze, Member/Pres.  
Musibau O. Shittu, Member/Sec.

Names and addresses of all Stockholders

Percentage of Stock Ownership

CHRISTOPHER NWAEEZE 15646 TWIN VALLEY CT SILVER SPRING MD 20906  
100%

Christopher Nwaeze  
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 MUSIBAU O. SHITTU

VOTING ADDRESS 958 JAK ST BALTIMORE MD 21225

PROPERTY ON WHICH TAX IS PAID 958 JAK ST BALTIMORE MD 21225

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:

Kamran Assadi  
Lisa Beth Sasser

**BOARD OF LIQUOR LICENSE COMMISSIONERS FOR BALTIMORE CITY  
APPLICANTS' INTERVIEW FORM**

ADDRESS OF LICENSED PREMISES: 8-14 PARK AV BALTIMORE MD 21201

1. Corporate Name (if any): C AND G GROUP LLC

2. Biographical background of each applicant:

(a) Name: CHRISTOPHER NWAEEZE D.O.B. 04-29-77 Marital Status M

Address: 15644 TWIN VALLEY CT SILVER SPRING MD 20906 Home phone: 301 924 1883

Employment History for past 10 years (Please provide dates for various employers):

TASTE International MAY 2006 4314-16 Curtis Ave  
Anyado Group SEP 2012 10 S. Calvert St.

(b) Name: Musibau O. Shittu D.O.B. 03-06-73 Marital Status S

Address: 958 JAK ST. Home phone: 240-446-2794

Employment History for past 10 years (Please provide dates for various employers):

Taste International May 2006 - present 4314-16 Curtis A  
Anyado Group Sept 2012 - present 10 S. Calvert.

(c) Name: \_\_\_\_\_ D.O.B. \_\_\_\_\_ Marital Status \_\_\_\_\_

Address: \_\_\_\_\_ Home phone: \_\_\_\_\_

Employment History for past 10 years (Please provide dates for various employers):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. If married applicant's spouse is not an applicant or stockholder, give spouse's full name, date and place of birth, Social Security number, home address, place of employment for the past ten years and the reason why the spouse is not going on the license:

	Spouse's Name	DOB	Place of Employment	Reason not going on license
(a)	GRACE NWAEEZE	08-28-75	Anyado Group, LLC	None US Citizen
(b)				
(c)				



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

Full name	Address	DOB	Employment	\$ Investment	Source of funds

5. Purchase price of business: 50,000.00 Down payment 25,000  
 Terms for balance due ONE year financed 6% 2,151.66 per mo  
 Payee Park View, LLC  
 Owner of real property Georgia Marudas Phone #: 410889-33  
 Rental fee and terms of lease 16,500.00 X 5 YEARS  
 or  
 Cost of real property \_\_\_\_\_ Down payment \_\_\_\_\_  
 Terms for balance due \_\_\_\_\_  
 Payee \_\_\_\_\_  
 or  
 Cost of business and property \_\_\_\_\_ Down payment \_\_\_\_\_  
 Terms for balance due \_\_\_\_\_  
 Payee \_\_\_\_\_

6. Source of funds: (a) Indicate the source of funds being used by each applicant to purchase the business. (b) If funds to purchase the business are a gift or loan, identify person/institution from whom funds are being obtained. (c) If the funds to purchase the business are not presently on deposit, indicate yearly earning from applicant's place of employment or business. (Personal income tax records may be requested by the Board to verify income.) (d) If funds are from personal savings, indicate approximate balance of all bank/investment accounts for past two years (such records to be presented to the Board upon request).

Name: Christopher Nwaeze - Savings, business loan

Name: Musibau O. Shitty - no monetary inv.

Name: \_\_\_\_\_

7. Indicate where other financial assistance may be derived if needed by applicants/business:

N/A

8. Who will be the full time operator of the establishment?

CHRISTOPHER NWAENZE

If a manager is to be hired, biographical information must be submitted:

Name \_\_\_\_\_ Address \_\_\_\_\_

D.O.B. \_\_\_\_\_ S.S.N. \_\_\_\_\_ Marital Status \_\_\_\_\_

Employment history for the past 10 years: \_\_\_\_\_

9. Describe the licensed premises: \_\_\_\_\_

Formerly Tony's Dinner A Restaurant and Bar interconnected but segmented into 3 areas

10. Have you previously held an alcoholic beverage license in the State of Maryland or in any other state? If so, where and when? YES

Name: Nwaeze - Yes 10 S. Calvert, 4314-116 Curtis Ave

Name: Shitty - Yes " " "

Name: \_\_\_\_\_

11. Is the licensed premises presently open and operating? Yes

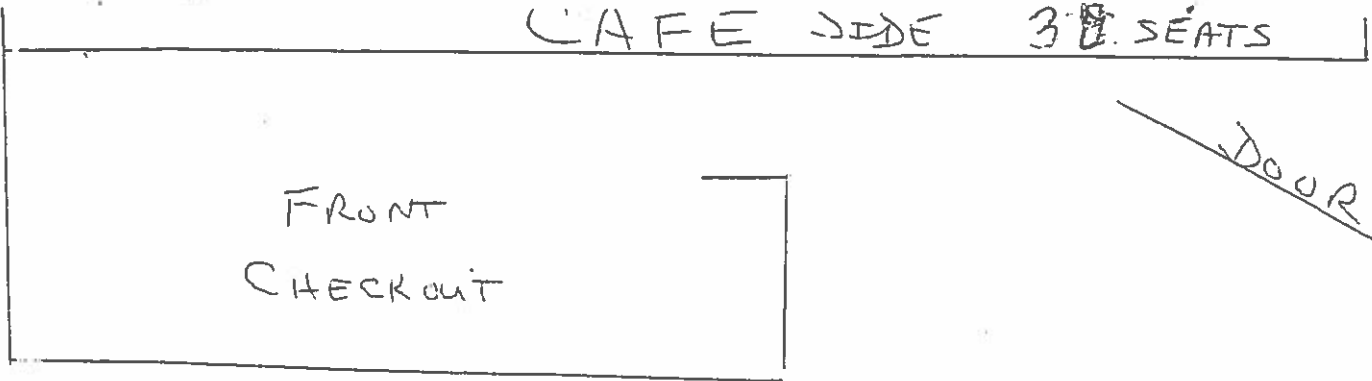
If not, when did the establishment close? \_\_\_\_\_

12 Whom may we contact about posting the transfer notice? Name, address, phone number: 443-615-5957

13. Inspector(s) handling transfer: \_\_\_\_\_

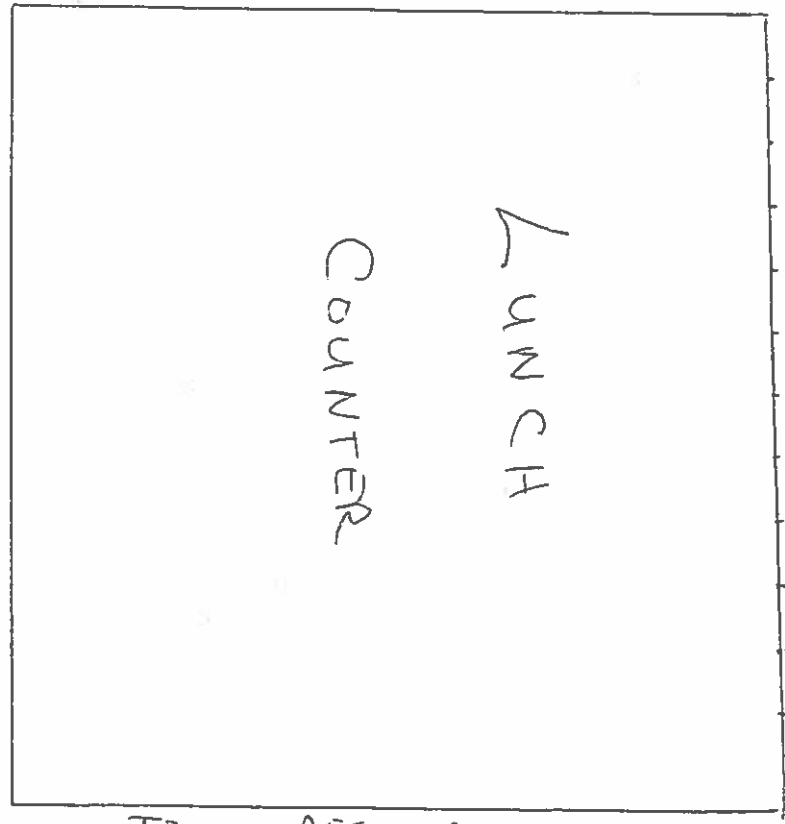
Date of interview \_\_\_\_\_

CAFE SIDE 3 SEATS

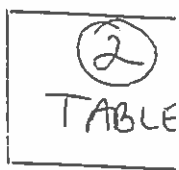
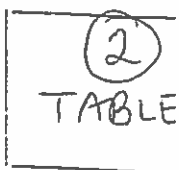


DOOR

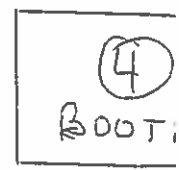
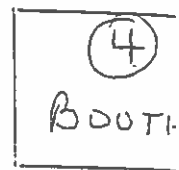
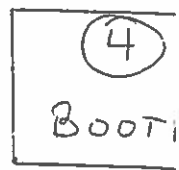
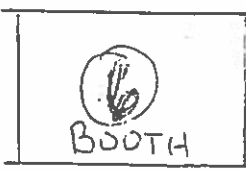
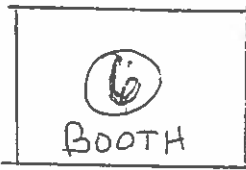
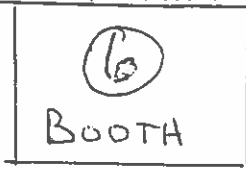
← TO RESTAURANT



COUNTER SEATING

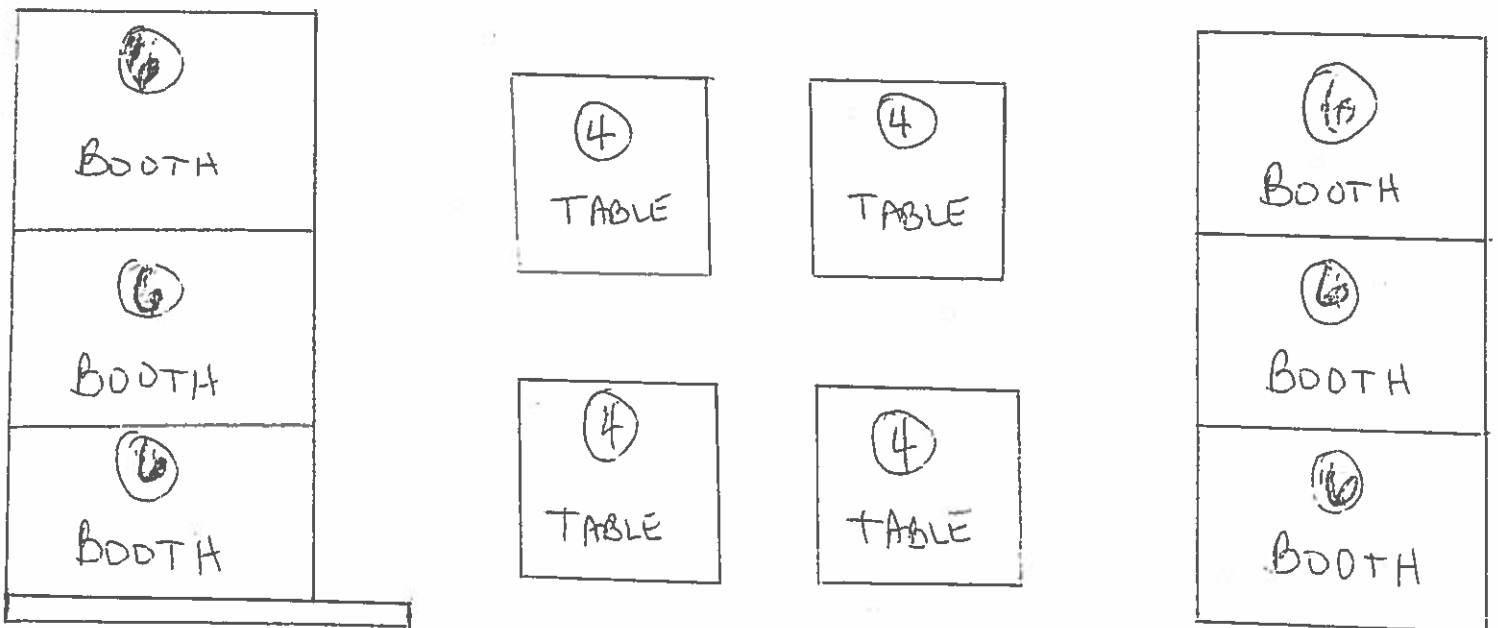
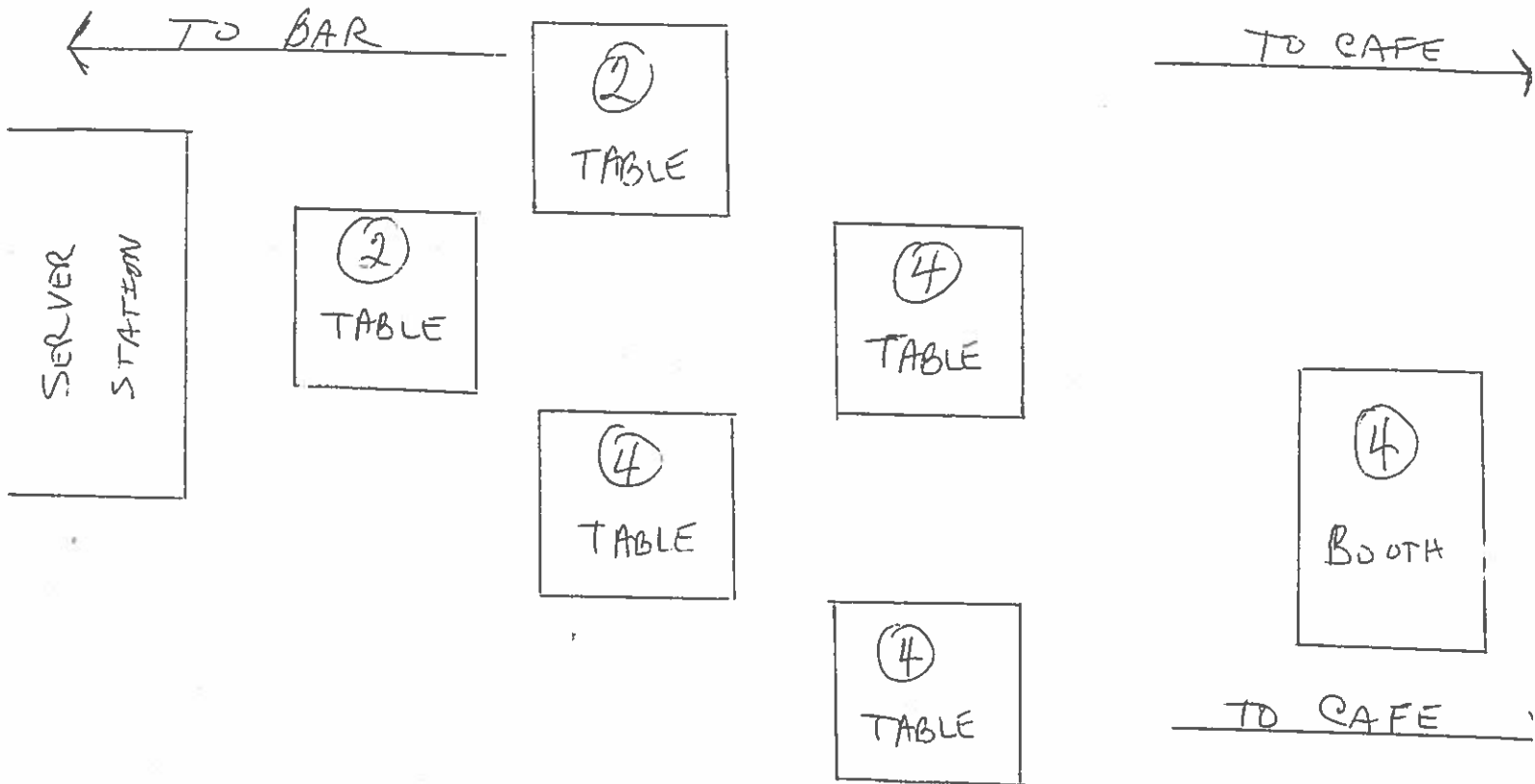
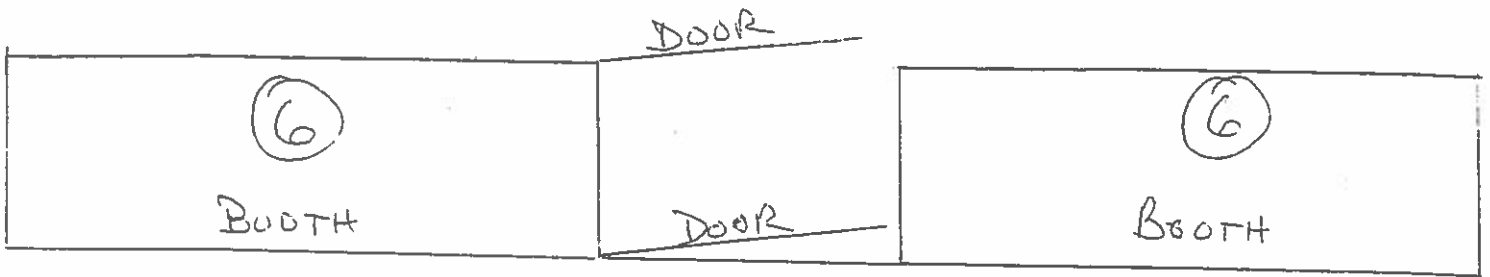


← TO RESTAURANT



# MAIN DINING ROOM

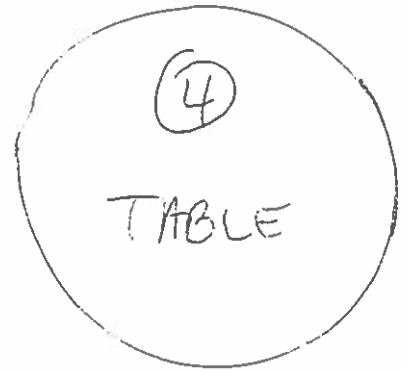
84 SEATS



BAR

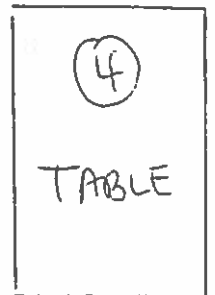
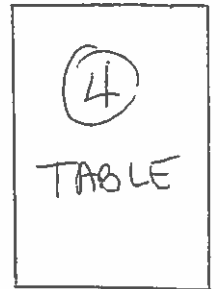
20 SEATS

DOOR

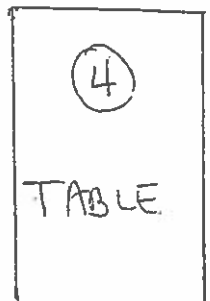
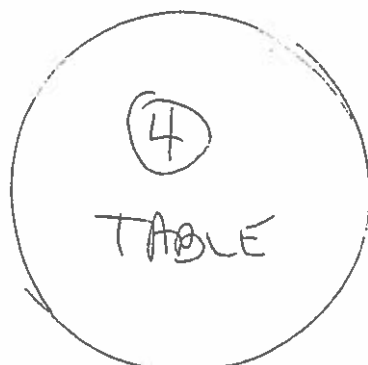


TO DINING ROOM →

BAR



TO RESTROOMS





Close

Print

## re: 8-14 Park Avenue Request for Postponement

From: Melvin Kodenski (melvinjkodenski@hotmail.com)  
Sent: Fri 9/25/15 3:17 PM  
To: michelle.bailey-hedgepeth@baltimorecity.gov (michelle.bailey-hedgepeth@baltimorecity.gov)

Pursuant to our discussion, I did speak with my client about the hearing and he agrees that there are still a few more elements that he has to get together.

So, we would appreciate it if the matter would be postponed and you indicated you could put it back in on October 15, 2015.

Thank you.

*Melvin J. Kodenski, Esquire*  
19 E. Fayette Street, Suite 400  
Baltimore, Maryland 21202  
410-685-5100  
410-685-5825 (fax)

**New Application**

**Applicant(s): Donald Kelly & Justin Dvorkin**

**901 Hamden, LLC T/a Trade name pending**

**901 W. 36<sup>th</sup> Street**

**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, requests for live entertainment, outdoor table service and off-premise catering

Attached is a copy of the application and map.

**Community Letter(s)/ Memorandum of Understanding:**

**Last Inspection Date(s): Not Applicable (New Licensee)**

**SDAT: In Good Standing**

**Board Decision:**



Maryland Department of Assessments and Taxation Business Services (w1)

8e

Entity Name: 901HAMDEN, LLC

Department ID: W16729394

General Information

Amendments

Personal Property

Certificate of Status

**Principal Office (Current):**

901 W 36TH STREET  
BALTIMORE, MD 21211

**Resident Agent (Current):**

DONALD KELLY  
1812 BALTIMORE ANNAPOLIS BLVD  
ANNAPOLIS, MD 21409

**Status:**

**ACTIVE**

**Good Standing:**

Yes

**Business Code:**

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

**Date of Formation or Registration:**

08/25/2015

**State of Formation:**

MD

**Stock/Nonstock:**

N/A

**Close/Not Close:**

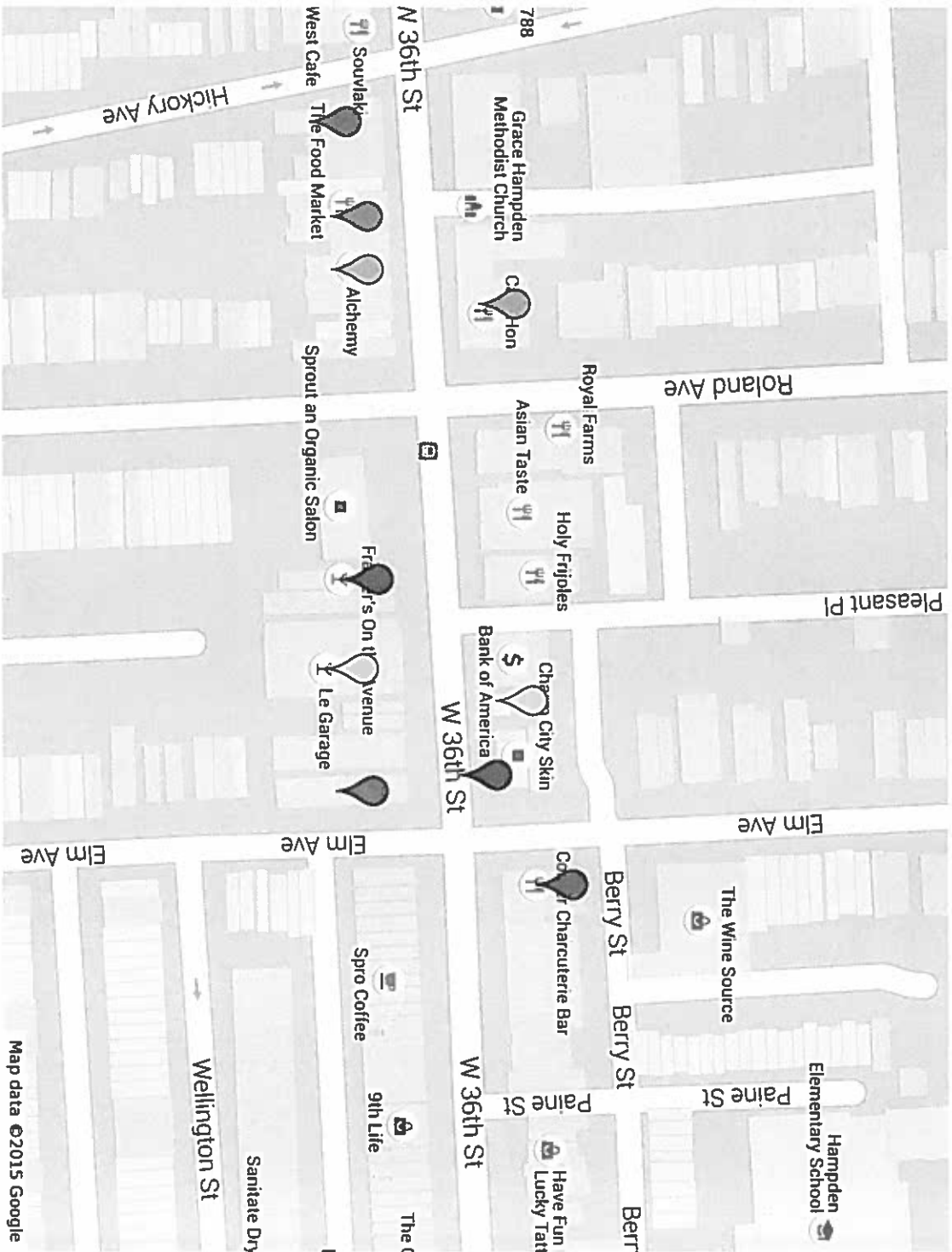
Unknown

# 901 W 36th Street

Untitled layer

- 📍 901 W 36th St
- 📍 Le Garage
- 📍 Frazier's On the Avenue
- 📍 Alchemy Restaurant
- 📍 Golden West Cafe
- 📍 13.5% Wine Bar
- 📍 The Food Market
- 📍 Grano Pasta Bar
- 📍 Cafe Hon
- 📍 David's on the Avenue
- 📍 David's on the Avenue
- 📍 Daniela
- 📍 Corner Charcuterie Bar

901 Hamden LLL t/a PENDING



# Application for Alcoholic Beverages License

## Board of Liquor License Commissioners for Baltimore City

CLASS TYPE: New B LICENSE AT THE LOCATION: 901 W. 36th St IF TRANSFER, LOCATION: \_\_\_\_\_  
CORPORATE/LLC/LLP/PARTNERSHIP NAME: 901 Hamden LLC TRADE NAME: \_\_\_\_\_

ATTORNEY FOR THE APPLICANT: A Hurdle ADDRESS: 19 E Faye He St PHONE: 4106855700 EMAIL: ah@alhurdelaw.com

INDICATE TYPE OF LICENSE APPLICATION: TRANSFER  NEW  EXPANSION OF PREMISES  SUBSTITUTE  AMENDMENT(S)  B

Describe Part of Premises to be Used: Complete Building Will you offer delivery of food and/or alcohol?  Yes  No

Will Live Entertainment be provided?  Yes  No What Kind? Acoustic Band

Will Outdoor Table Service Be Provided?  Yes  No Off Premise Catering of Food and Alcohol?  Yes  No

Please note that as per Art. 2B §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 DHCD?  Yes  No If yes, please attach. If no, please give timeframe for obtaining letter of approval: prior to hearing

WORKER'S COMPENSATION INFORMATION - INSURANCE CARRIER: Hartford/Sentinel POLICY OR BINDER #: 30WECLH 0210

1. Applicant A Donald Kelly 914-447-1481 donkellypub@gmail.com

(full name) (telephone no.) E-mail (Required) 1812 Baltimore Annapolis Blvd Annapolis, MD 21409

(residence) Street City State Zip Code (period of residency in Baltimore City) 7-1973 male Bronx, NY

(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 Justin Dworkin 201-906-0283 jdworkin@gmail.com

(full name) (telephone no.) E-mail (Required) 2109 Lighthouse Lane Baltimore, MD 21224 (4 years)

(residence) Street City State Zip Code (period of residency in Baltimore City)

8-1982 male New Jersey

(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:

2609 Lighthouse Lane

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

N/A

(full name) (telephone no.) 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?

1. 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 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  B  C

No

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  B  C

Pratt Street Pub LLC  
Alehouse At Columbia LLC  
SP(ville) LLC

4. Has the applicant(s) ever had a liquor license

suspended or revoked?  Yes  No If yes, explain in adjacent space.

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  No If 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.

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.

Applicant A  B  C

Applicant A  B  C

Applicant A  B  C

8. Is the licensed premises presently open and operating?  Yes  No If no, please provide information requested in adjacent space provided.

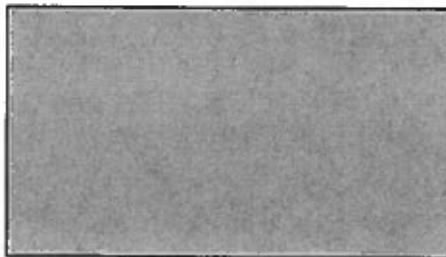
Closure Date:

Explanation:

*not a licensed establishment*

**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:



NEW "B"

11. 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.)

1) NAME: Donald Kelly ADDRESS: 1812 Bt A Blvd. TITLE: Member % OF STOCK HELD RESIDENCE: Annapolis MD 21409 70%

2) NAME: Justin Dvorcin ADDRESS: 2609 Lighthouse Ln. TITLE: Member % OF STOCK HELD RESIDENCE: Baltimore, MD 21224 30%

3) NAME: N/A ADDRESS: \_\_\_\_\_ TITLE: \_\_\_\_\_ % OF STOCK HELD RESIDENCE: \_\_\_\_\_

4) NAME: N/A 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 hereby 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 A: \_\_\_\_\_ Signature of Applicant B: \_\_\_\_\_ Signature of Applicant C: \_\_\_\_\_



Balto Co. SS 1st day of August  
 THIS CERTIFIES THAT ON THE OF \_\_\_\_\_  
 before the subscriber a notary public of the State of Maryland, personally appeared Justin Dvorcin and Donald Kelly

The applicant(s) names in the foregoing 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.

*Elaine Pappas*

901 W 36<sup>th</sup> St

Name and Address of the owners of the premise/landlord: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**STATEMENT OF OWNER OF PREMISES REQUIRED IN CONNECTION WITH ALCOHOLIC BEVERAGES LAW OF MARYLAND**

(I, WE) \_\_\_\_\_ HEREBY CERTIFY That (I am, we are) the owner(s) of the property located at \_\_\_\_\_ Baltimore, City with a Zip Code of \_\_\_\_\_, 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 conducted, at any and all hours

(Witness (my, our) hand(s) and seal(s) this \_\_\_\_\_ day of \_\_\_\_\_ in the year of \_\_\_\_\_

WITNESS \_\_\_\_\_

STATE OF MARYLAND  
THIS CERTIFIES, THAT ON \_\_\_\_\_ day of \_\_\_\_\_  
Before the subscriber a notary public of the State of Maryland, personally appeared \_\_\_\_\_

and acknowledge the execution of the foregoing statement to be \_\_\_\_\_ act

(Witness my hand and seal)  
Notary Public \_\_\_\_\_

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 present application is to be conducted, certify that the qualifying 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.

Names	Address	Signature	DOB (Month/Year)	Length of time Acquainted with the Applicant(s)
Shelley D'Neil	3613 Hickory Ave Baltimore, MD 21211	<i>[Signature]</i>	1/73	25 Years
Frank White	123 E. Barney Street, Baltimore, MD 21230	<i>[Signature]</i>	04/1979	25 Years
Steve Fogelman	726 S Clinton St 21224	<i>[Signature]</i>	5/69	7 yrs

**FOR OFFICE USE ONLY**

DATE FILED: 9/11/15 NEW/TRANSFER/EXPANSION - \$500.00 PAID:  POSTING DATE: 9/31/15

SUBSTITUTE APPLICATION FEE - \$250.00 PAID:  PRINT NAME OF BLLC STAFF: \_\_\_\_\_ INITIALS: \_\_\_\_\_

Board of Liquor License Commissioners for the City of Baltimore, 231 East Baltimore Street, 6<sup>th</sup> Floor, Baltimore, Maryland 21202  
Phone: 410-396-4377 Fax: 410-396-4382

Status of Application  
Approved: Yes  No   
Date: \_\_\_\_\_  
BLLC Initials: \_\_\_\_\_

Withdrawn: Yes  No   
Date: \_\_\_\_\_  
BLLC Initials: \_\_\_\_\_



Elaine Pappas  
Notary Public

exp: 11/19/18

(Witness my hand and seal)

Name and Address of the owners of the premise/landlord: Avenue + Elm LLC Phone  
Number: 410-977-4738 2519 Wilkens Ave  
Baltimore, MD

STATEMENT OF OWNER OF PREMISES REQUIRED IN CONNECTION WITH  
ALCOHOLIC BEVERAGES LAW OF  
MARYLAND

(I, WE) M.M. Levitt, Member Avenue and Elm, LLC HEREBY CERTIFY, That (I  
am, we are) the owner(s) of the property located at

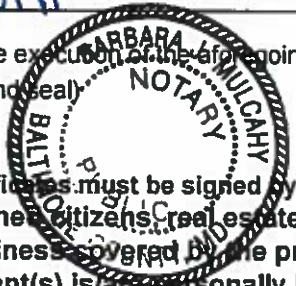
901 W. 36th St., Baltimore, City with a Zip Code  
of \_\_\_\_\_, which is named in the present application made to Board of Liquor License  
Commissioners of Baltimore City under the Alcoholic Beverage Laws of Maryland and assent to the granting of  
the license applied for, and hereby authorize the 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 conducted, at any and all hours.

(Witness (my, our) hand(s) and seal(s) this 26 day of August  
2015 in the year of

WITNESS: [Signature] Dominic Lewis

STATE OF MARYLAND  
THIS CERTIFIES, THAT ON 26 day of August, 2015  
Before the subscriber a notary public of the State of Maryland, personally appeared  
Eric Levitt

and acknowledge the execution of the foregoing statement to be truthful act.  
(Witness my hand and seal) Notary Public [Signature] Barbara Mulcahy



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 present application is to be conducted, certify that the  
qualifying 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.

Names	Address	Signature	DOB (Month/Y ear)	Length of time Acquainted with the Applicant(s)

**FOR OFFICE USE ONLY**

DATE FILED: \_\_\_\_\_ NEW/TRANSFER/EXPANSION - \$500.00 PAID:   
DATE: \_\_\_\_\_

SUSTITUTE APPLICATION FEE - \$250.00 PAID  PRINT NAME OF BLLC  
STAFF \_\_\_\_\_ INTIALS \_\_\_\_\_

Board of Liquor License Commissioners For the City of Baltimore, 231  
East Baltimore Street, 6<sup>th</sup> Floor, Baltimore, Maryland 21202  
Phone: 410-396-4377 Fax: 410-396-4382

<b>Status of Application</b> Approved: Yes <input type="checkbox"/> No <input type="checkbox"/> <input type="checkbox"/> Date: _____ BLLC Initials: _____  Withdrawn: Yes <input type="checkbox"/> No <input type="checkbox"/> <input type="checkbox"/>
--

**\*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.\***

**HAMDEN TAVEREN**

8.25.15

<b><u>BUSINESS</u></b>	<b><u>Estimated</u></b>	<b><u>Paid Out</u></b>	<b><u>Balance</u></b>
RENT (SECURITY-1ST Month rent)	\$ 26,000.00	\$ -	\$ 26,000.00
UTILITIES/DEPOSITS	\$ 2,500.00	\$ -	\$ 2,500.00
	<b>\$ 28,500.00</b>	<b>\$ -</b>	<b>\$ 28,500.00</b>
<b><u>GENERAL CONTRACTOR</u></b>	<b><u>COST/UNIT</u></b>	<b><u>Paid Out</u></b>	
CONTRACTOR	\$ 250,000.00	\$ -	\$ 250,000.00
ARCHITECT/M&P/DESIGN EQUIP	\$ 35,000.00	\$ -	\$ 35,000.00
DEMO	\$ 2,500.00	\$ -	\$ 2,500.00
<b><u>TOTAL CONTRACTING</u></b>	<b>\$ 287,500.00</b>	<b>\$ -</b>	<b>\$ 287,500.00</b>
<b><u>KITCHEN/BAR/SMALLWARES</u></b>	<b><u>COST/UNIT</u></b>	<b><u>PAID</u></b>	
KITCHEN/BAR/HOOD	\$ 175,000.00	\$ -	\$ 175,000.00
SMALL WARES	\$ 30,000.00	\$ -	\$ 30,000.00
DRAFT LINES - AC BEVERAGE	\$ 35,000.00	\$ -	\$ 35,000.00
DISHWASHER	\$ 5,800.00	\$ -	\$ 5,800.00
CASK LINES -UK BREWING	\$ 3,000.00	\$ -	\$ 3,000.00
<b><u>TOTAL BAR EQUIPMENT</u></b>	<b>\$ 248,800.00</b>	<b>\$ -</b>	<b>\$ 248,800.00</b>
<b><u>Sound Equipment/Video Equipment</u></b>	<b><u>COST/UNIT</u></b>	<b><u>PAID</u></b>	
VIDEO/AUDIO/TELE/CAMERAS/IT	\$ 55,000.00	\$ -	\$ 55,000.00
DVR	\$ 3,500.00	\$ -	\$ 3,500.00
Direct TV	\$ 3,000.00	\$ -	\$ 3,000.00
<b><u>TOTAL SOUND AND LIGHTING</u></b>	<b>\$ 61,500.00</b>	<b>\$ -</b>	<b>\$ 61,500.00</b>
<b><u>FURNITURE/RETAIL</u></b>	<b><u>COST/UNIT</u></b>	<b><u>PAID</u></b>	
LARRY BOOTHS/TABLES	\$ 45,000.00	\$ -	\$ 45,000.00
CHAIR UP CHAIRS AND BAR STOOLS	\$ 22,500.00	\$ -	\$ 22,500.00
SHIRT ORDER/RETAIL	\$ -	\$ -	\$ -
<b><u>TOTAL FURNITURE</u></b>	<b>\$ 67,500.00</b>	<b>\$ -</b>	<b>\$ 67,500.00</b>
<b><u>REGISTERS</u></b>	<b><u>COST/UNIT</u></b>	<b><u>PAID</u></b>	
MICROS	\$ 30,000.00	\$ -	\$ 30,000.00
<b><u>TOTAL REGISTERS</u></b>	<b>\$ 30,000.00</b>	<b>\$ -</b>	<b>\$ 30,000.00</b>
<b><u>MARKETING AND ADVERTISING</u></b>	<b><u>COST/UNIT</u></b>	<b><u>PAID</u></b>	
ADS/LOGO/WEBSITE	\$ 15,000.00	\$ -	\$ 15,000.00
EXTERIOR SIGN GABLE	\$ 12,500.00	\$ -	\$ 12,500.00
VIDEO SIGNAGE GABLE	\$ -	\$ -	\$ -
INTERIOR SIGNS/VINYL INSTALL	\$ 7,500.00	\$ -	\$ 7,500.00
	\$ -	\$ -	\$ -
<b><u>TOTAL MKT. &amp; ADV.</u></b>	<b>\$ 35,000.00</b>	<b>\$ -</b>	<b>\$ 35,000.00</b>

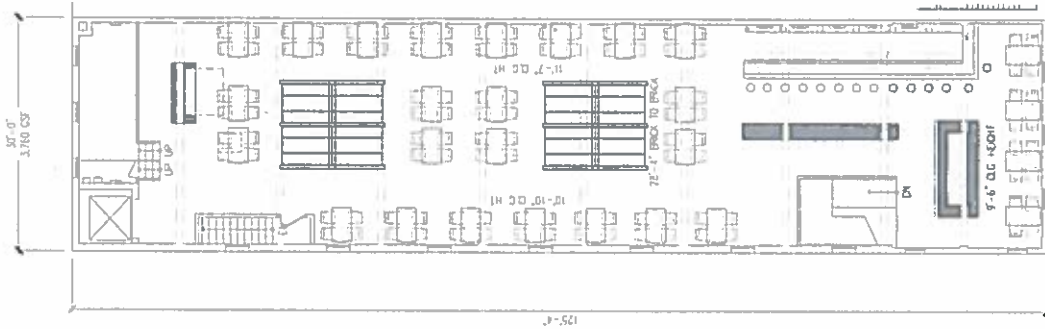
<u>MISC.</u>	<u>COST/UNIT</u>	<u>PAID</u>	
LEGAL	\$ 5,500.00	\$ -	\$ 5,500.00
PAYROLL	\$ 40,000.00	\$ -	\$ 40,000.00
CONSTRUCTION INS	\$ 2,300.00	\$ -	\$ 2,300.00
OFFICE SUPPLIES	\$ 7,500.00	\$ -	\$ 7,500.00
MISC	\$ 10,000.00	\$ -	\$ 10,000.00
OPERATING CAPITAL	\$ 40,000.00	\$ -	\$ 40,000.00
<u>TOTAL MISC.</u>	<u>\$ 105,300.00</u>	<u>\$ -</u>	<u>\$ 105,300.00</u>
<u>TOTAL OPENING COSTS</u>	<u>\$ 864,100.00</u>	<u>\$ -</u>	<u>\$ 864,100.00</u>

\$



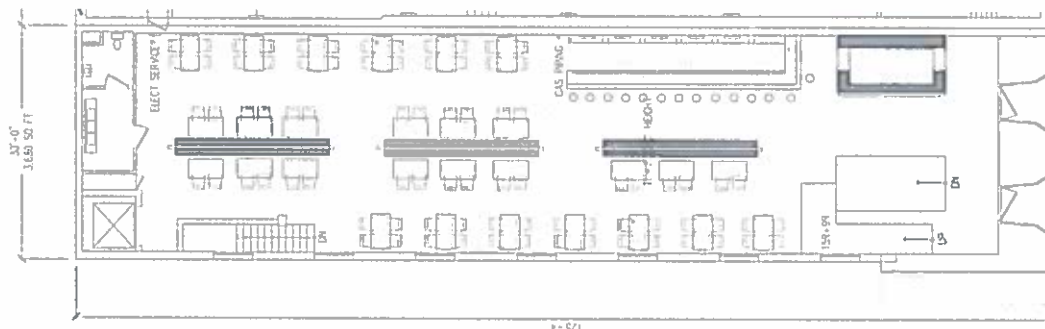
SEATING PLAN	AS NOTED	901 W. 36TH STREET	HISTORIC HAMDEN DISTRICT	BALTIMORE, MD	FAB/DATE
REVISION	REVISION				
NO.	DATE	DESCRIPTION	320 TOTAL SEATS SHOWN -- 11,200 SQ FT		

156 TABLE SEATS, 14 BAR SEATS



**C** UPPER LEVEL PLAN

112 TABLE SEATS, 14 BAR SEATS

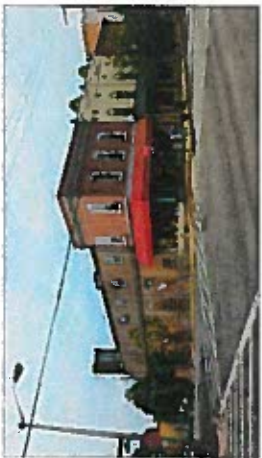


**B** GROUND FLOOR PLAN

24 "OVERFLOW" TABLE SEATS



**A** LOWER LEVEL PLAN



**New Application**

**Licensee: Maria Streb, Paul Daino & Sean Fitzpatrick**

**Niki, LLC T/a Handlebar Café,**

**511 S. Caroline Street**

**Class "B" Beer, Wine & Liquor License**

Application for a new Class "B" Beer, Wine & Liquor restaurant license under the provisions of Article 2B Section 6-201 (d) (vii) \$500,000 in capital investment in restaurant fixtures and facilities and seating capacity for a minimum of 75 people, request for outdoor table service, live entertainment & off-premises catering

Attached is a copy of the application and map.

**Community Letter(s)/ Memorandum of Understanding: Yes - Attached**

**Posting Date(s): September 30, 2015**

**SDAT: In Good Standing**

**Board Decision:**

Maryland Department of Assessments and Taxation Business Services (w3)

[Search Help](#)

Entity Name: NIKI LLC

Department ID: W15949423

General Information

Amendments

Personal Property

Certificate of Status

**Principal Office (Current):** 30 HIGH STREET  
WALDORF, MD 20602

**Resident Agent (Current):** KIRTAN PATEL  
30 HIGH STREET  
WALDORF, MD 20602

**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:** 07/03/2014

**State of Formation:** MD

**Stock/Nonstock:** N/A

**Close/Not Close:** Unknown



# 511 S Caroline St

Untitled layer

- 511 S Caroline St
- Sticky Rice
- Pazo
- Teavolve

Handlebar Cafe





STATE OF MARYLAND  
**BOARD OF LIQUOR LICENCE COMMISSIONERS**  
**FOR BALTIMORE CITY**  
 231 E. BALTIMORE STREET, 6TH FLOOR  
 BALTIMORE, MARYLAND 21202-3258  
 (410) 398-4377  
 FAX (410) 398-4382

Zoning District \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Date: \_\_\_\_\_  
 ZONING DIVISION \_\_\_\_\_  
 Department of Housing and  
 Community Development

**Alcoholic Beverage License Application**

Application for a Class B-1 License at the location NO 511 S Caroline St  
 Corporate/LLC name NRG, LLC Trade name Handiebar Cafe  
 Attorney for Applicant (s) J.R. Woolman, LLC Address: 111 South Charles St. Suite 2700 Phone: 410-385-8328

**To the Board of Liquor License Commissioners for Baltimore City:**

Application is made by the undersigned for the above license under the provisions of Article 2B of the Annotated Code of Maryland as amended, and the following information is submitted as required by the Article:

**1. Applicant(s)**

(A) Name: Maria Streb

Address: 1814 Bank Street Zipcode: 21231

Home phone number 415-280-5308 Date of birth 6-24-65 Sex F

Place of birth Baltimore, MD How long at current address? 5 yrs

Have you been a resident or taxpayer of Baltimore City for 2 years preceding the filing of this application? \_\_\_\_\_  
 City resident: Yes X No \_\_\_\_\_ or Address of property on which tax is paid in your individual name:

1814 Bank Street

Have you ever been convicted of a felony? Yes \_\_\_\_\_ No X Been found guilty of violation of alcoholic beverage laws? Yes \_\_\_\_\_ No X Been found guilty of violating gambling laws? Yes \_\_\_\_\_ No X Been found guilty of any offense against the laws of the United States? Yes \_\_\_\_\_ No X If yes, provide details: \_\_\_\_\_

What financial interest do you have in the business to be conducted under this license? 52%

Are you financially interested in any other alcoholic beverage business for which a license has been applied, granted or issued? Yes \_\_\_\_\_ No X Do you have any indebtedness or other financial obligations to any manufacturer, brewer, distiller, or wholesaler at the time of making this application? Yes \_\_\_\_\_ No X Have you previously held a license for the sale of alcoholic beverages? Yes \_\_\_\_\_ No X If yes, state when and where: \_\_\_\_\_

Is there anyone else who has a financial interest in this license or the business to be conducted under it? Yes X No \_\_\_\_\_

If granted a license, will you incur any indebtedness or financial obligation to any manufacturer, brewer, distiller or wholesaler other than for the purchase of alcoholic beverages? Yes \_\_\_\_\_ No X

If granted a license, will you conform to all laws and regulations relating to the business in which you propose to engage? Yes or No \_\_\_\_\_ Do you consent to the Board of Liquor License Commissioners being furnished with a copy of your arrest record, if any? Yes  No

(B) Name: Paul Deino

Address: 1814 Bank Street Baltimore, MD Zipcode: 21231

Home phone number 831-842-1172 Date of birth 7-18-82 Sex M

Place of birth Bay Shore, N.Y. How long at current address? \_\_\_\_\_

Have you been a resident or taxpayer of Baltimore City for 2 years preceding the filing of this application? \_\_\_\_\_  
 City resident: Yes X No \_\_\_\_\_ or Address of property on which tax is paid in your individual name:

Have you ever been convicted of a felony? Yes \_\_\_\_\_ No X Been found guilty of violation of alcoholic beverage laws? Yes \_\_\_\_\_ No X Been found guilty of violating gambling laws? Yes \_\_\_\_\_ No X Been found guilty of any offense against the laws of the United States? Yes \_\_\_\_\_ No X If yes, provide details: \_\_\_\_\_

What financial interest do you have in the business to be conducted under this license? 24%

Are you financially interested in any other alcoholic beverage business for which a license has been applied, granted or issued? Yes \_\_\_\_\_ No X Do you have any indebtedness or other financial obligations to any manufacturer, brewer, distiller, or wholesaler at the time of making this application? Yes \_\_\_\_\_ No X Have you previously held a license for the sale of alcoholic beverages? Yes \_\_\_\_\_ No X If yes, state when and where: \_\_\_\_\_

Is there anyone else who has a financial interest in this license or the business to be conducted under it? Yes X No \_\_\_\_\_

If granted a license, will you incur any indebtedness or financial obligation to any manufacturer, brewer, distiller or wholesaler other than for the purchase of alcoholic beverages? Yes \_\_\_\_\_ No X

If granted a license, will you conform to all laws and regulations relating to the business in which you propose to engage? Yes or No \_\_\_\_\_ Do you consent to the Board of Liquor License Commissioners being furnished with a copy of your arrest record, if any? Yes  No

Office use only:

(C) Name: Sean Fitzpatrick

Address: 1729 E. Lombard St. Zipcode: 21231

Home phone number 301-606-9414 Date of birth 4-25-87 Sex M

Place of birth Prince Georges County, MD How long at current address? 3 Mo.

Have you been a resident or taxpayer of Baltimore City for 2 years preceding the filing of this application? \_\_\_\_\_  
City resident: Yes  No \_\_\_\_\_ or Address of property on which tax is paid in your individual name: \_\_\_\_\_

Have you ever been convicted of a felony? Yes \_\_\_\_\_ No  Been found guilty of violation of alcoholic beverage laws? Yes \_\_\_\_\_ No  Been found guilty of violating gambling laws? Yes \_\_\_\_\_ No  Been found guilty of any offense against the laws of the United States? Yes \_\_\_\_\_ No  If yes, provide details: \_\_\_\_\_

What financial interest do you have in the business to be conducted under this license? 24%

Are you financially interested in any other alcoholic beverage business for which a license has been applied, granted or issued? Yes \_\_\_\_\_ No  Do you have any indebtedness or other financial obligations to any manufacturer, brewer, distiller, or wholesaler at the time of making this application? Yes \_\_\_\_\_ No  Have you previously held a license for the sale of alcoholic beverages? Yes \_\_\_\_\_ No  If yes, state when and where: \_\_\_\_\_

Is there anyone else who has a financial interest in this license or the business to be conducted under it? Yes  No

If granted a license, will you incur any indebtedness or financial obligation to any manufacturer, brewer, distiller or wholesaler other than for the purchase of alcoholic beverages? Yes  No

If granted a license, will you conform to all laws and regulations relating to the business in which you propose to engage? Yes or No Do you consent to the Board of Liquor License Commissioners being furnished with a copy of your arrest record, if any? Yes  No

2. Address of the place to be licensed 511 South Carolina Street Zipcode 21231

Phone number 415-280-5306 Part of the building in which the business will be

conducted 1st Floor (home storage on 2nd floor)

Will you provide live entertainment? YES What kind? Misc. including Bicycle Shows

Outdoor table service? YES Off premises catering of food and alcohol? Yes

Will you offer delivery of food and/or alcohol? Yes

The name, address and telephone number of the owner of the real property in which the business is to be

operated MIKI, LLC 1814 Bank Street, Baltimore, MD 21231 415-280-5306

What merchandise will be handled in connection with sale of alcoholic beverages? Bicycles and related equipment

I submit herewith a statement duly executed and acknowledged by the owner of the premises in which the business is to be conducted, assenting to the granting of the license applied for, authorizing the Comptroller, the 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 Baltimore City, 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 conducted, at any and all hours. I also submit herewith, and as a part hereof, a certificate signed by at least three citizens whom I know to be owners of real estate and registered voters of the city in which the business is to be conducted, containing the voting residence of each and the real estate situated in the city where the business is to be conducted of which each is the owner, and setting forth the length of time each has been acquainted with the applicant; and certifying that they have examined this application, that they have good reason to believe that all of the statements contained herein are true, that they are of the opinion that the applicant is a suitable person to obtain the license applied for, and that they are familiar with the premises upon which the proposed business is to be conducted and believe them suitable for the conduct of the business of a retail dealer in alcoholic beverages.

Extract from Law - If any signed statement, report, affidavit or oath, required under any of the provisions of this Article shall contain any false statement, the offender shall be deemed guilty of perjury, and upon conviction thereof, shall be subject to the penalties provided by law for that crime.

[Signature]  
Applicant

AFFIDAVIT

STATE OF MARYLAND, City of Baltimore,

THIS CERTIFIES, That on the 10th day of May June, 20 15

before the subscriber, a Notary Representative of the State of Maryland, personally appeared

before me, LARISA SHARON

the applicant named in the foregoing application, and made oath in due form of law that the statements therein are true to the best of his knowledge and belief.

WITNESS my hand and official seal.

(SEAL)

**LARISA SHARON**  
Notary Public  
Baltimore County  
Maryland  
My Commission Expires Dec. 7, 2016

[Signature]

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

I we HEREBY CERTIFY, That I am the owner(s) of property known as 511 South Caroline Street

named in the application made by NIKI, LLC  
to the Board of Liquor License Commissioners of Baltimore City, under the Alcoholic Beverages Law of Maryland, for a  
Class B-1 Restaurant License

License expiring April 30, 2016; that I we assent to the granting of the license applied for, and that I we hereby  
authorize the State Comptroller, his duly authorized deputies, inspectors and clerks, the Board of Liquor License Com-  
missioners of Baltimore City, its duly authorized agents and employees and any peace officer of Baltimore City 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 conducted, at any and all hours.

Witness my our hand(s) and seal(s) this 11th day of June 2015

Witness:  
MARK ETYARD MARILYN STARR  
Address 591 BOWEN AVE BALTIMORE MD 21231 1514 BAY ST - BOX 106 MD 21215

### READ CAREFULLY

(The following certificate must be signed by at least THREE CITIZENS.)

We, the undersigned reputable citizens, certify:

- (1) That we are the owners of real estate situated in the City of Baltimore.
- (2) 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 with applicant
<u>Michael Wright</u>	<u>Voting Residence 1605 Eastern Ave</u>	<u>3 YEARS</u>
	<u>Property Owned 1605 Eastern Ave</u>	
<u>Gregory Buckman</u>	<u>Voting Residence 1605 Eastern Ave</u>	<u>3 YEARS</u>
	<u>Property Owned 1605 Eastern Ave</u>	
<u>CHRISTIAN WILKINS</u>	<u>Voting Residence 2315 CHAPEL STREET</u>	<u>3 YEARS</u>
	<u>Property Owned 2315 CHAPEL STREET</u>	
	<u>Voting Residence</u>	
	<u>Property Owned</u>	
	<u>Voting Residence</u>	
	<u>Property Owned</u>	

(The names and addresses of the signers must be printed or typewritten above their signatures)

FOR CLUBS, CORPORATIONS, PARTNERSHIPS AND ASSOCIATIONS

Name of Corporation, Partnership, Club or Association Niki, LLC

Trade Name Handlebar Cafe

Address 511 South Charles Street, Baltimore, MD

Names of all officers or partners:

Marla Streb, President

Paul Daino, Vice President

Marla Streb, Treasurer

Mark Fitzgerald, Secretary

Names and addresses of all Stockholders	Percentage of Stock Ownership
Marla Streb, 1814 Bank Street, Baltimore, MD 21231	52%
Paul Daino, 1814 Bank Street, Baltimore, MD 21231	24%
Sean Fitzpatrick, 1729 E. Lombard Street, Baltimore, MD 21231	24%

Marla Streb   
*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 Marla Streb

VOTING ADDRESS 1814 Bank Street

PROPERTY ON WHICH TAX IS PAID 1814 Bank Street

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:

.....  
.....  
.....

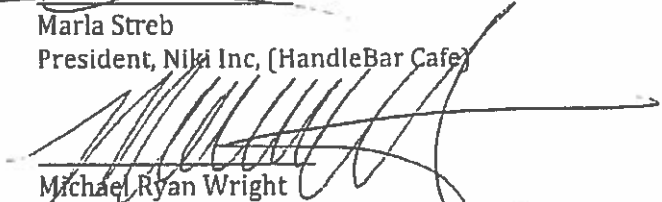
HandleBar Cafe Liquor License  
MOU with DPNA  
September 9<sup>th</sup>, 2015

Per BMZA Resolution of 08/20/2015 on the conditions of HandleBar Cafe's use permit for a Restaurant, the HandleBar Cafe agrees to the following limitations on its Class B Restaurant Liquor License:

1. A minimum of 6 feet of side walk must remain clear and unobstructed for pedestrian use;
2. The capacity of the outdoor seating area will not be more than (7) seven tables and (14) fourteen patrons;
3. The tables will be limited to those that can seat (2) two patrons and are to be kept against the wall of the building;
4. There will be no outside bar;
5. There will be no outdoor music, a jukebox, or other form of entertainment;
6. All patrons must be served by wait staff;
7. Sound mitigation efforts will be completed as testified to on the record;
8. The conditional use of the restaurant with outdoor table service will be limited with respect to hours of operation in the following manner:
  - Monday through Thursday; food service will cease at 10:00 pm;
  - Saturday and Sunday food service will cease at 1:00 am, and,
  - Appellant will comply with all other laws and regulations of the City of Baltimore with respect to the sales, service, and consumption of alcoholic beverages.

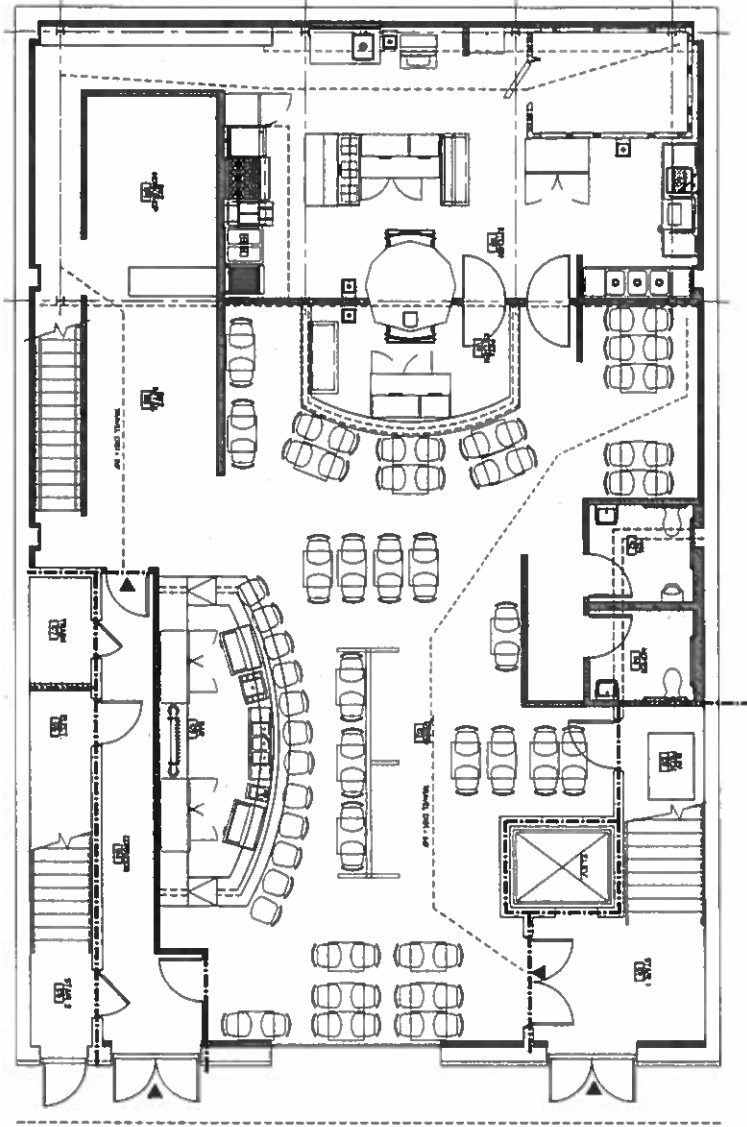


Marla Streb  
President, Niki Inc, (HandleBar Cafe)



Michael Ryan Wright  
President DPNA, LLC (Douglass Place Neighborhood Association)

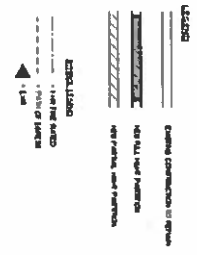
E1 OVERALL FLOOR PLAN



S. CAROLINE ST.



NOTES



© Design Evolution Architects, LLC 2015

A10

Project Number: 10042

Sheet Number: 01

Overall Floor Plan/ Egress Plan

Scale: AS NOTED

Date: 12.15.15

3.14.15 PREPARED

3.20.15 CHECKED

3.23.15 DESIGN REVIEW

3.23.15 DESIGN REVIEW

Date: 12.15.15

HANDLEBAR CAFE  
 511 S. CAROLINE ST.  
 BALTIMORE, MD



**Violations****Licensee: Mustafa Jackson & Brittney Moore****Four One Four, LLC T/a Kings and Diamonds****414-16 E. Baltimore Street**

**Violation of Rule 4.17(a) Sexual Practices and Obscenity –August 8, 2015–** Starting at approximately 9:30 PM, members of the Baltimore City Police Department’s Vice Squad conducted an undercover investigation at the establishment. At approximately 11:30 PM, Det. Gatto, of the Vice Squad, made contact with an individual later identified as Ms. Shadyrra Jacobs who was a dancer at the establishment. Det. Gatto initiated a conversation with Ms. Jacobs who stated that she would have sexual intercourse with Det. Gatto for \$600 outside of the establishment or for \$300 if he preferred to have sexual intercourse inside of the establishment.

**Violation of Adult Entertainment Rule 9 Codes Compliance – August 8, 2015–** Starting at approximately 9:30 PM, members of the Baltimore City Police Department’s Vice Squad conducted an undercover investigation at the establishment. At approximately 11:30 PM, Det. Gatto, of the Vice Squad, made contact with an individual later identified as Ms. Shadyrra Jacobs who was a dancer at the establishment. Det. Gatto initiated a conversation with Ms. Jacobs who stated that she would have sexual intercourse with Det. Gatto for \$600 outside of the establishment or for \$300 if he preferred to have sexual intercourse inside of the establishment.

**Violation of Rule 4.17(a) Sexual Practices and Obscenity –August 8, 2015–** Starting at approximately 9:30 PM, members of the Baltimore City Police Department’s Vice Squad conducted an undercover investigation at the establishment. At approximately 11:30 PM, Det. Garrett, of the Vice Squad, entered the establishment and later made contact with an individual later identified as Ms. Cabrina Robinson who was a dancer at the establishment. Det. Garrett initiated a conversation with Ms. Jacobs who stated that she would have sexual intercourse with Det. Garrett in the stage area for \$200.

**Violation of Adult Entertainment Rule 9 Codes Compliance – August 8, 2015–** Starting at approximately 9:30 PM, members of the Baltimore City Police Department’s Vice Squad conducted an undercover investigation at the establishment. At approximately 11:30 PM, Det. Garrett, of the Vice Squad, entered the establishment and later made contact with an individual later identified as Ms. Cabrina Robinson who was a dancer at the establishment. Det. Garrett initiated a conversation with Ms. Jacobs who stated that she would have sexual intercourse with Det. Garrett in the stage area for \$200.

**Violation History:**

- 8/7/2014 Public Hearing re: Violation of Adult Entertainment Rule 2 & Violation of Adult Entertainment Rule 8 (a). Board DISMISSED charges

**Board Decision:****Violations**



INCIDENT REPORT  
Form 04/008  
1180-25-56

POLICE DEPARTMENT  
BALTIMORE, MARYLAND

1 Crime / Incident <b>Prostitution</b>	Attempt <input type="checkbox"/>	2 Complaint Number <b>150805044</b>
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Person     Property     Vehicle     Miscellaneous

Domestic Related     Gang Related     Juvenile Related     Hate Crime

3 Location of Offense / Incident (Exact Street Address) <b>416 E Baltimore St</b>	Page <b>1</b> of <b>2</b>
--	---------------------------

4 Date / Time Occurred <b>8/8/15@ 12am</b>	5 Date / Time Reported <b>8/8/15@ 12am</b>
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6 Unit <b>4842</b>	7 Post of Occurrence <b>sector 1</b>	8 Reporting Area	9 Street Code	10 CAD Number <b>3068</b>	11 Location Given by Dispatcher <b>on view</b>	12 Companion Report No
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13 Case Status <input type="checkbox"/> Open <input type="checkbox"/> Closed	14 Case Disposition <input type="checkbox"/> Cleared <input type="checkbox"/> Not Cleared	15 Follow-up <input type="checkbox"/> Yes <input type="checkbox"/> No	16 Crime Code	17 Crime Classification	18 Describe Location of Offense or Type of Premise <b>Business</b>	19 Reported by Crime Watcher <input type="checkbox"/> Yes <input type="checkbox"/> No
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20 Complainant / Victim <b>Det J Garrett</b>	Name (Last, First, MI) or Firm Name of Business <b>Det J Garrett</b>	Residence / Address (Include City County State Zip) <b>6001 E Fayette St</b>	Sex	Race	Age	DOB <b>1232</b>
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Where Employed or School Attending (Include City Located) <b>BPD</b>	Occupation <b>Detective</b>	Hours of Employment <b>various</b>	Residence Phone <b>4103962626</b>	Other Phone	Scricty <b>sbr</b>
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21 Injuries and Location on Body <b>none</b>	Victim's Condition <b>fair</b>	Victim Hospitalized <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	22 Victim / Assailant Relationship	23 Current / Former Cohabitant <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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24 Reporting Person <b>Det J Garrett</b>	Name (Last, First, MI)	Sex	Race	Age	DOB <b>1232</b>	Address (Include City County State Zip) <b>601 E Fayette St</b>	Residence Phone <b>4103962626</b>	Other Phone
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25 Witness Parent/Guardian	Name (Last, First, MI)	Address (Include City County State Zip)	Residence Phone	Other Phone
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26 Suspect <b>Robinson, Carbrina Valentine</b>	Name (Last, First, MI)	Address (Include City County State Zip) <b>328 E 23RD St, 21218</b>	Sex <b>f</b>	Race <b>b</b>	Age <b>37</b>	DOB <b>6/11/78</b>	Height <b>5-3</b>	Weight <b>150</b>
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Complexion <b>light bro</b>	Hair Color/Length/Style <b>black/curley</b>	Hat	Eyes <b>bro</b>	Facial Hair	Teeth	Shirt/Coat
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Pants	Shoes	Additional Descriptors (Tattoos, Piercing, Scars, Marks, Accent, etc)	Arrest Number
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27 Trademarks of Suspect(s) (Action / Conversation)	28 Point of Entry	29 Location Last Seen	30 Manner of Escape	31 Direction of Escape
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32 Weapon / Means of Attack	33 Method Used to Commit Crime	34 Type of Property Taken	35 Total Loss Value
-----------------------------	--------------------------------	---------------------------	---------------------

36 Vehicle Information <input type="checkbox"/> Suspect <input type="checkbox"/> Victim <input type="checkbox"/> Stolen <input type="checkbox"/> Towed <input type="checkbox"/> Other	Tag Number	State	Expiration	Vehicle Year/Make	Model	Body Style/Color	Message
--	------------	-------	------------	-------------------	-------	------------------	---------

Vehicle Identification Number (VIN)	Ignition Locked <input type="checkbox"/> Yes <input type="checkbox"/> No	Keys in Ignition <input type="checkbox"/> Yes <input type="checkbox"/> No	Doors Locked <input type="checkbox"/> Yes <input type="checkbox"/> No	Windows Closed <input type="checkbox"/> Yes <input type="checkbox"/> No	Radio in Car <input type="checkbox"/> Yes <input type="checkbox"/> No	Battery in Car <input type="checkbox"/> Yes <input type="checkbox"/> No	Spare Tire in Car <input type="checkbox"/> Yes <input type="checkbox"/> No	Trunk Locked <input type="checkbox"/> Yes <input type="checkbox"/> No
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37 Registered Owner Name (Last, First, MI)	Sex	Race	Age	DOB	Address (Include City County State Zip)
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38 Recovered by	39 Method of Theft	40 Evidence of Stripping / Tampering	41 Rapo Check <input type="checkbox"/> Yes <input type="checkbox"/> No	42 Tow List Check <input type="checkbox"/> Yes <input type="checkbox"/> No	43 Owner Notified <input type="checkbox"/> Yes <input type="checkbox"/> No
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44 Tow Information	Location Towed From	Location Towed To	Towed by	Tow Truck Operator Signature
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45 Detective Notified	Sequence No	Assignment	Unit Number	Date	Time	46 Medical Examiner Notified	Date	Time
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47 Crime Lab Technician Name	Unit Number	Time	48 Hot Desk Person Notified	Time
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49 Communications Supervisor Notified <input type="checkbox"/> Yes <input type="checkbox"/> No	50 Citywide Broadcast <input type="checkbox"/> Yes <input type="checkbox"/> No	Time	51 Victim Assistance/Incident Information Explained Form(s) Provided <input type="checkbox"/> Yes <input type="checkbox"/> No
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52 Copies Forwarded To
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Cont'd Sections Narrative (1) Continuation of any preceding items (2) Property Listing, to include property taken and seized/submitted evidence/property (3) property inventory number(s) when applicable. (3) Describe details of incident, include all steps taken in preliminary investigation. (4) List all additional notifications including name, agency or assignment, unit number, telephone number, date, time (5) List all arrests including Arrest Numbers and charges

see page 2



Contin

53 Reporting Officer Name (PRINT CLEARLY) <b>Det J Garrett</b>	Sequence No <b>1232</b>	Assignment <b>SES</b>	Signature <i>[Signature]</i>
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54 Approving Supervisor Rank and Name	Sequence No	Assignment	Signature <i>[Signature]</i>
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POLICE DEPARTMENT  
BALTIMORE, MARYLAND

1 Crime / Incident <b>Prostitution</b>	Attempt <input type="checkbox"/>	2 Complain Number <b>150805044</b>
3 Location of Offense / Incident (Street Address, Zip) <b>416 E Baltimore St</b>		Page <b>2</b> of <b>2</b>
4 Date / Time of This Report <b>8/8/15@ 12am</b>		5 Arrest / Custody Number
6 Unit <b>4842</b>	7 Post of Occurrence <b>sector 1</b>	8 Reporting Area
9 Street Code	10 CAD Number <b>3068</b>	11 Original Report Date / Time <b>8/8/15@ 12am</b>
12 Offense / Incident Changed From	13 Case Status <input type="checkbox"/> Open <input type="checkbox"/> Closed	14 Multiple Clearance <input type="checkbox"/> Yes <input type="checkbox"/> No
15 Case Disposition <input type="checkbox"/> Cleared <input type="checkbox"/> Not Cleared	16 Follow-up <input type="checkbox"/> Yes <input type="checkbox"/> No	17 Crime Code
18 Crime Classification	19 Complainant / Victim <b>Det J Garrett</b>	20 Residence / Address (Include City County State, Zip) <b>601 E Fayette St</b>
Sex <b>m</b>	Race <b>m</b>	Age <b>DOB</b> <b>1232</b>

Continuation       Follow Up

Person     Property     Miscellaneous     Vehicle     Missing Person     Custody

20 Copies Forwarded To

**Conf'd Sections** Narrative: (1) Continuation of any preceding items (2) Property Listing, to include property taken and seized/submitted evidence/property list property inventory number(s) when applicable (3) Record all activity and all developments in case subsequent to last report. Include names and arrest numbers of all persons arrested. Explain any crime/incident description change (4) List all additional notifications, including name, agency or assignment, unit number, telephone number, date, time. (5) Recommend case status when applicable (6) If Multiple Clearances, include all affected complaint/case numbers

On 8/8/2015 at approx 1130pm, this Detective entered the Kings and Diamonds strip club in an undercover/plain clothes capacity. Upon entering the club this Detective acted as a patron with the purpose of being possibly solicited for prostitution. At approx. 1150pm this Detective was approached by a b/f wearing a two piece leather outfit with silver stones on same. She was light skinned, 5-3 in height, 150lbs, with curly black hair. She made eye contact with this Detective and then approached where I was seated. She then began to dance on this Detective while I was seated at the bar. After she finished dancing she then sat on a stool beside me and asked me my name. I told her my name and we began to have a conversation. I then asked her name and she told me Sabrina, but that her club name was Peaches. She then asked me if I thought she was sexy and I told her yes. She then told me that her pussy was tight and that she knew I wanted some. I then said that I did. She then told me that it would cost me. I asked how much and she told me 200 dollars and to pull my penis out and we could have sex where we were sitting. I then told her that I didn't want to have sex at the bar and she said for 50 more dollars we could get a private room. I then told her that I had to get money from my car and exited the club. Armed with her description, I relayed her description to Detective Greenhill which was able to identify Peaches from her MD identification as Carbrina Valentino Robinson b/f, DOB-6/11/78. A criminal summons will be obtained in reference to this incident. All events occurred in Baltimore City, State of Maryland. Copy of this report forwarded to the Liquor Board.

Continue

21 I affirm and declare that the statements above are true to the best of my knowledge: Reporting Person's Signature \_\_\_\_\_ Date \_\_\_\_\_

22 Reporting Officer Name (PRINT CLEARLY) **Det J Garrett** Sequence No **1232** Assignment **SES** Signature \_\_\_\_\_

23 Approving Supervisor Rank and Name \_\_\_\_\_ Sequence No \_\_\_\_\_ Assignment \_\_\_\_\_ Signature \_\_\_\_\_

24 RMS Data Entered By \_\_\_\_\_ Sequence No \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_ 25 Reviewer \_\_\_\_\_ 26 Referred To \_\_\_\_\_

POLICE DEPARTMENT  
BALTIMORE, MARYLAND

1 Crime / Incident <b>Liquor Board Violation</b>	Attempt <input type="checkbox"/>	2 Complaint Number <b>1 150805035</b>
3 Location of Offense / Incident (Exact Street Address) <b>414-416 E. Baltimore St</b>		Page <b>1</b> of <b>2</b>
4 Date / Time Occurred <b>8/8/2015 @ 0001 hrs</b>		5 Date / Time Reported <b>same #4</b>

Person     Property     Vehicle     Miscellaneous

Domestic Related     Gang Related     Juvenile Related     Hate Crime

6 Unit <b>4844</b>	7 Post of Occurrence <b>sector 1</b>	8 Reporting Area	9 Street Code	10 CAD Number <b>2982</b>	11 Location Given by Dispatcher <b>on view</b>	12 Companion Report No
13 Case Status <input type="checkbox"/> Open <input checked="" type="checkbox"/> Closed	14 Case Disposition <input checked="" type="checkbox"/> Cleared <input type="checkbox"/> Not Cleared	15 Follow-up <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	16 Crime Code	17 Crime Classification	18 Describe Location of Offense or Type of Premise <b>City Adult night club</b>	19 Reported by Crime Watch <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

20 Complainant / Victim <b>Gatto, A</b>	Name (Last, First, MI) or Firm Name if Business	Residence / Address (Include City, County, State, Zip) <b>601 E. Fayette St</b>	Sex <b>m</b>	Race <b>w</b>	Age	DOB
Where Employed or School Attending (Include City Located) <b>BCPD</b>	Occupation <b>police</b>	Hours of Employment/Residence Phone <b>varies</b>	Other Phone		Job	
21 Injuries and Location on Body		Victim's Condition	Victim Hospitalized <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Facility	22 Victim / Assailant Relationship	23 Current / Former Cohabitant <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

24 Reporting Person	Name (Last, First, MI) <b>same #20</b>	Sex	Race	Age	DOB	Address (Include City, County, State, Zip)	Residence Phone	Other Phone
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25 Witness Parent/Guardian	Name (Last, First, MI)	Address (Include City, County, State, Zip)	Residence Phone	Other Phone
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26 Suspect <b>Jacobs, Shadyrra</b>	Name (Last, First, MI)	Address (Include City, County, State, Zip) <b>3222 Woodring Ave</b>	Sex <b>F</b>	Race <b>B</b>	Age	DOB <b>2/23/94</b>	Height	Weight
Complexion	Hair Color/Length/Style	Hat	Eyes	Facial Hair	Teeth	Shirt/Coat	Arrest Number <b>pending</b>	
Paras	Shoes	Additional Descriptors (Tattoos, Piercings, Scars, Marks, Accents, etc.)				Arrest Number		

27 Trademarks of Suspect(s) (Action / Conversation)	28 Point of Entry	29 Location Last Seen	30 Manner of Escape	31 Direction of Esc
32 Weapon / Means of Attack	33 Method Used to Commit Crime	34 Type of Property Taken	35 Total Loss Val	

36 Vehicle Information	Suspect <input type="checkbox"/> Victim <input type="checkbox"/> Stolen <input type="checkbox"/> Towed <input type="checkbox"/> Other <input type="checkbox"/>	Tag Number	State	Expiration	Vehicle Year/Make	Model	Body Style/Color	Mileage	
Vehicle Identification Number (VIN)		Ignition Locked <input type="checkbox"/> Yes <input type="checkbox"/> No	Keys in Ignition <input type="checkbox"/> Yes <input type="checkbox"/> No	Doors Locked <input type="checkbox"/> Yes <input type="checkbox"/> No	Windows Closed <input type="checkbox"/> Yes <input type="checkbox"/> No	Radio in Car <input type="checkbox"/> Yes <input type="checkbox"/> No	Battery in Car <input type="checkbox"/> Yes <input type="checkbox"/> No	Spare Tire in Car <input type="checkbox"/> Yes <input type="checkbox"/> No	Trunk Locked <input type="checkbox"/> Yes <input type="checkbox"/> No

37 Registered Owner Name (Last, First, MI)	Sex	Race	Age	DOB	Address (Include City, County, State, Zip)
--	-----	------	-----	-----	--

38 Recovered by	39 Method of Theft	40 Evidence of Stripping / Tampering	41 Repo. Check <input type="checkbox"/> Yes <input type="checkbox"/> No	42 Tow List Check <input type="checkbox"/> Yes <input type="checkbox"/> No	43 Owner Notified <input type="checkbox"/> Yes <input type="checkbox"/> No
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44 Tow Information	Location Towed From	Location Towed To	Towed by	Tow Truck Operator Signature
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45 Detective Notified	Sequence No	Assignment	Unit Number	Date	Time	46 Medical Examiner Notified	Date	Time
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47 Crime Lab Technician Name	Unit Number	Time	48 Hot Desk Person Notified	Time
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49 Communications Supervisor Notified <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	50 Citywide Broadcast <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Time	51 Victim Assistance/Incident Information Form(s) Provided <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--	--	------	---

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Cont'd Sections Narrative: (1) Continuation of any preceding items. (2) Property Listing, to include property taken and seized/submitted evidence/property list property inventory number(s) when applicable. (3) Describe details of incident. Include all steps taken in preliminary investigation. (4) List all additional notifications, including name, agency or assignment, unit number, telephone number, date, time. (5) List all arrests, including Arrest Numbers and charges.

Corp: Four One Four, LLC  
T/A: Kings and Diamonds  
414-416 E. Baltimore St 21202  
LBD7 225  
Licensee: Brittney Moore, Mustafa Jackson



53 Reporting Officer Name (PRINT CLEARLY) <b>Gatto, A</b>	Sequence No <b>1115</b>	Assignment <b>VICE</b>	Signature <i>[Signature]</i>
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54 Approving Supervisor Rank and Name <b>Sgt. Leisher</b>	Sequence No <b>G307</b>	Assignment <b>VICE</b>	Signature <i>[Signature]</i>
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55 RMS Data Entered By	Sequence No	Date	Time	56 Reviewer	57 Referred To
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**POLICE DEPARTMENT**  
**BALTIMORE, MARYLAND**

1 Crime / Incident <b>Liquor Board Violation</b>	Attempt <input type="checkbox"/>	2 Complaint Number <b>1 150805035</b>
3 Location of Offense / Incident (Street Address, Zip) <b>414-416 E. Baltimore St</b>		Page <b>2</b> of <b>2</b>
4 Date / Time of This Report <b>8/8/2015 @ 0001hrs</b>		5 Arrest / Custody Number

Continuation                       Follow Up

Person     Property     Miscellaneous     Vehicle     Missing Person     Custody

6 Unit <b>4844</b>	7 Post of Occurrence <b>sector 1</b>	8 Reporting Area	9 Street Code	10 CAD Number <b>2982</b>	11 Original Report Date / Time <b>same #4</b>	12 Offense / Incident Changed From	
13 Case Status <input type="checkbox"/> Open <input checked="" type="checkbox"/> Closed		14 Multiple Clearance <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		15 Case Disposition <input checked="" type="checkbox"/> Cleared <input type="checkbox"/> Not Cleared		16 Follow-Up <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
17 Crime Code		18 Crime Classification					

19 Complainant/Victim <b>Gatto, A</b>	Name (Last, First, MI), or Firm Name if Business <b>Gatto, A</b>	Residence / Address (Include City County State Zip) <b>601 E. Fayette St</b>	Sex <b>M</b>	Race <b>W</b>	Age	DOB
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20 Copies Forwarded To

Cont'd Sections Narrative: (1) Continuation of any preceding items. (2) Property Listing, to include property taken and seized/submitted evidence/property list property inventory number(s) when applicable. (3) Record all activity and all developments in case subsequent to last report, include names and arrest numbers of all persons arrested. Explain any crime/incident classification change. (4) List all additional notifications, including name, agency or assignment, unit number, telephone number, date same. (5) Recommend case status when applicable. (6) If Multiple Clearance, include all affected complaint/case numbers.

On 8/8/2015 at approx 2130hrs. This Detective entered 414-416 E. Baltimore St, which is known as Kings and Diamonds. This Detective entered this location in an undercover capacity, posing as a patron of the establishment. This location is an adult entertainment establishment. Upon my arrival of the location, I sat down at the bar and began ordering drinks from the bar tender. During the time I was inside Kings and Diamonds, I was approached by numerous dancers who are employee's of the establishment. The dancers would approach me and put their hands on me and many times put their rear ends on my body. The dancers would sit on my lap or push my legs apart so they could put their rear end between my legs in order to press themselves up against me. On several occasions the dancers would grab my hand and put it on their rear end or even in some cases on their vagina. During the course of my investigation, I met a black female dancer who was later identified as Shadyrra Jacobs b/f 2/23/94, 3222 Woodring Ave 21234. While speaking with her, she informed me that her stage name was "silk". "Silk" was wearing a black thong and black top. At approx 2330hrs, I was in a private area with "silk" while she was giving me a lap dance. The lap dance lasted for approx 30 minutes. At the end of the dance I told "silk" that I wanted to fuck her. "Silk" replied to me, "so what do you want?" Again I said, I want to fuck you, I wanna have sex. "Silk" then told me that I would have to wait till she got off work, but she wanted something in return. I asked her what did she want? Shadyrra Jacobs aka "Silk" told me she wanted \$300 dollars up front and \$300 dollars after sex. I agreed to that and told her I would pick her up after work. As I was leaving she told me if I wanted to just get the \$300 up front and we could find a private room in the club and have sex in there. This Detective agreed to that also. I then exited the location and reported the following information to Det. Greenhill who was the officer in charge during this undercover investigation. Det. Greenhill entered this location wearing plain clothes and a police tactical vest which displayed the word "POLICE" in bold white letters on the front and back of same. Det. Greenhill while inside Kings and Diamonds, positively identified "Silk" aka Shadyrra Jacobs. Det. Greenhill also did a verification of identification on the remaining employees inside this establishment. All events occurred in Baltimore City Maryland. A copy of this report will be forwarded to the Liquor Board.

Cont'd

21 I affirm and declare that the statements above are true to the best of my knowledge:

22 Reporting Officer Name (PRINT CLEARLY) <b>Gatto, A</b>	Sequence No <b>1115</b>	Assignment <b>VICE</b>	Signature <i>A. Gatto</i>
23 Approving Supervisor Rank and Name <b>Sgt. Leisher</b>	Sequence No <b>G307</b>	Assignment <b>VICE</b>	Signature <i>C. A.</i>

24 RMS Data Entered By	Sequence No	Date	Time	25 Reviewer	26 Referred To
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## DISTRICT COURT OF MARYLAND

[Go Back Now](#)**Case Information**Court System: **DISTRICT COURT FOR BALTIMORE CITY - CRIMINAL SYSTEM**Case Number: **4B02306021** Tracking No: **151001683243**Case Type: **CRIMINAL**District Code: **01** Location Code: **02**Document Type: **SUMMONS** Issued Date: **08/12/2015**Case Status: **ACTIVE****Defendant Information**Defendant Name: **JACOBS, SHADYRRA**Race: **BLACK, AFRICAN AMERICAN**Sex: **F** Height: **000** Weight: **000** DOB: **02/23/1994**Address: **3222 WOODRING AVE**City: **PARKVILLE** State: **MD** Zip Code: **21234 - 0000****Court Scheduling Information**Trial Date: **10/20/2015** Trial Time: **01:30 PM** Room: **3**

Trial Type:

Trial Location: **700 E. PATAPSCO AVENUE BALTIMORE 21225-1960****Charge and Disposition Information***(Each Charge is listed separately. The disposition is listed below the Charge)*Charge No: **001** Description: **PROSTITUTION-GENERAL**Statute: **CR.11.306** Description: **PROSTITUTION-GENERAL**Amended Date: CJIS Code: **1 1093** MO/PLL: Probable Cause: **X**Incident Date From: **08/08/2015** To: **08/08/2015** Victim Age:**Related Person Information***(Each Person related to the case other than the Defendant is shown)*Name: **MCKNIGHT, ABRAHAM S**Connection: **COMPLAINANT/POLICE OFFICER**Agency Code: **AD** Agency Sub-Code: **5908** Officer ID: **I115**Name: **GATTO, ABRAHAM**Connection: **COMPLAINANT****Event History Information**

Event Date	Comment
SUMI 08/12/2015	SUM ISSUED 150812 AGENCY:AD 5908

*This is an electronic case record. Full case information cannot be made available either because of legal restrictions on access to case records found in Maryland rules 16-1001 through 16-1011, or because of the practical difficulties inherent in reducing a case record into an electronic format.*

State of Maryland

Board of Liquor License Commissioners

for Baltimore City  
231 E. Baltimore Street, 6<sup>th</sup> Floor  
Baltimore, Maryland, 21202-3258  
Phone: (410) 396-4377

**NOTICE**

To: Four One Four, LLC  
T/A Kings and Diamonds  
414-416 East Baltimore Street

Date: September 29, 2015

Licensee may be represented by  
Counsel before board

You are hereby notified to appear before the Board of Liquor License Commissioners for Baltimore City at 1 o'clock PM on the 15th day of October, 2015, in Room 215, City Hall, Baltimore Maryland to show cause why your Alcoholic Beverages License and other permits issued by this Board to you under the provisions of Article 2B of the Annotated Code of Maryland Title of "Alcoholic Beverages", as amended, should not be suspended or revoked as required by this Board by Section 10-401 of said Article, following your conviction and/or violation of said law, to wit:

**Location of Incident:** Kings and Diamonds, 414-416 East Baltimore Street, Baltimore, MD ("the establishment")

**Violation of Rule 4.17(a) Sexual Practices and Obscenity –August 8, 2015–** Starting at approximately 9:30 PM, members of the Baltimore City Police Department's Vice Squad conducted an undercover investigation at the establishment. At approximately 11:30 PM, Det. Gatto, of the Vice Squad, made contact with an individual later identified as Ms. Shadyrra Jacobs who was a dancer at the establishment. Det. Gatto initiated a conversation with Ms. Jacobs who stated that she would have sexual intercourse with Det. Gatto for \$600 outside of the establishment or for \$300 if he preferred to have sexual intercourse inside of the establishment.

**Violation of Adult Entertainment Rule 9 Codes Compliance – August 8, 2015–** Starting at approximately 9:30 PM, members of the Baltimore City Police Department's Vice Squad conducted an undercover investigation at the establishment. At approximately 11:30 PM, Det. Gatto, of the Vice Squad, made contact with an individual later identified as Ms. Shadyrra Jacobs who was a dancer at the establishment. Det. Gatto initiated a conversation with Ms. Jacobs who stated that she would have sexual intercourse with Det. Gatto for \$600 outside of the establishment or for \$300 if he preferred to have sexual intercourse inside of the establishment.

**Violation of Rule 4.17(a) Sexual Practices and Obscenity –August 8, 2015–** Starting at approximately 9:30 PM, members of the Baltimore City Police Department's Vice Squad conducted an undercover investigation at the establishment. At approximately 11:30 PM, Det. Garrett, of the Vice Squad, entered the establishment and later made contact with an individual later identified as Ms. Cabrina Robinson who was a dancer at the establishment. Det. Garrett initiated a conversation with Ms. Jacobs who stated that she would have sexual intercourse with Det. Garrett in the stage area for \$200.

**Violation of Adult Entertainment Rule 9 Codes Compliance – August 8, 2015–** Starting at approximately 9:30 PM, members of the Baltimore City Police Department's Vice Squad conducted an undercover investigation at the establishment. At approximately 11:30 PM, Det. Garrett, of the Vice Squad, entered the establishment and later made contact with an individual later identified as Ms. Cabrina Robinson who was a dancer at the establishment. Det. Garrett initiated a conversation with Ms. Jacobs who stated that she would have sexual intercourse with Det. Garrett in the stage area for \$200.

**City Hall security provisions require all persons entering the City Hall to present a photo ID.**

If you fail to appear at the time and place designated above, the board will proceed with the hearing and will take such action regarding the suspension or revocation of your license and permits as warranted by evidence. If you have any questions concerning the specific rules or code cited, please refer to Rules and Regulations for the Board of Liquor License Commissioners for Baltimore City or Article 2B of the Annotated Code of Maryland for reference purposes.

BY ORDER OF THE BOARD OF LIQUOR LICENSE  
COMMISSIONERS FOR BALTIMORE CITY

**Benjamin Neil, Esq., Chairman**

BOARD OF LIQUOR LICENSE  
COMMISSIONERS

**FOR BALTIMORE CITY**

**NOTICE**

**TO**

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Service of copy admitted at \_\_\_\_\_

This \_\_\_\_\_ day of \_\_\_\_\_

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Served by: \_\_\_\_\_



## Liquor Board System

Version 1.0

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

### License Detail

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#### License Info

License Num: **LBD7 225**Cert Num: **0631**Fee: **\$1,320.00** Status: **Renewed**

License Date: 5/1/2015

License Year: 2015

CR Number: 14632536

Payment Date: 05-06-15

2014 - 2015 TPP Paid 2015 Trader's License 

#### Adult Entertainment License

##### License Info

License Num: **AE 022**Cert Num: **1295**Fee: **\$1,000.00** Status: **Renewed**

License Date: 7/1/2015

License Year: 2015

CR Number: 14632536

Payment Date: 06-30-15

#### Adult Entertainment License Owners

##### License Owners

First Name	Last Name	Street	City	State	Zip
MUSTAFA	JACKSON	2033 E. BELVEDERE AVENUE	BALTIMORE	MD	21239
BRITTNAY	MOORE	3525 WABASH AVENUE	BALTIMORE	MD	21215

#### Add New Adult Entertainment License Owner

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Street: \_\_\_\_\_

City: **Baltimore**State: **MD** Zip: \_\_\_\_\_
[Add Owner](#)

#### Location

Corp Name: **FOUR ONE FOUR, LLC**Trade Name: **KINGS AND DIAMONDS**Zone Code: **26**Phone: **410-761-1000**



Block Num: 414-16  
City: BALTIMORE

Street: BALTIMORE STREET EAST  
State: MD Zip: 21202

CR Number: 14632536

Portion of Business Used:

USE FIRST FLOOR AS AN ADULT ENTERTAINMENT TAVERN

Restriction:

SHERRIE MATHEWS, RAMONA ENO, CONNIE FLETCHER, BETTIE COOK, LAVETTE SCHAPP,  
JACQUELINE HOPKINS & MARGARET WIMBUSH BARRED FROM PREMISES IN ANY  
CAPACITY.

### License Owners

First Name	Last Name	Street	City	State	Zip
MUSTAFA	JACKSON	2033 E. BELVEDERE AVENUE	BALTIMORE	MD	21239
BRITNAY	MOORE	4321 HAMILTON AVENUE	BALTIMORE	MD	21206

### Comments

Date	Comment
11/17/2014	8/7/2014 Public Hearing re: Violation of Adult Entertainment Rule 2 & Violation of Adult Entertainment Rule 8 (a). Board DISMISSED charges.
11/14/2014	08/21/14 - Charges dismissed for violations of adult entertainment rule 2 and 8 due to no police officers were present.
10/02/2012	9/27/2012 Public Hearing re: VIOLATION of Rule 4.18 Charter not in good standing. CANCELED. Submitted documentation. Paid \$125 fine in lieu of hearing
09/12/2011	9/1/11 Public Hearing re: Application to transger ownership of the Class LBD7 liquor license and the Adult Entertainment license where the establishment has been closed for more than 90 days. BOARD APPROVED TRANSFER.
08/18/2011	8/11 Transfer of Ownership of liquor and Adult Entertainment License, BD7-BWL, Brittnay Moore, Mustafa Jackson, Four One Four, LLC
06/14/2011	6/9/11 Public Hearing re: Request for a hardship extension under the provisions of Article 2B section 10-504(d). GRANTED 180 day extension.
03/16/2011	Licensee evicted from licensed premises; licenses on deposit.
09/09/2010	09/08/10 \$625 FINE PAID IN FULL #74812
09/01/2010	08/26/10 Public Hearing re: Violation of adult entertainment rules 5(2), rule 6, rule 4.01(a) & RULE 4.18. DECISION: RULE 5(2) GUILTY \$500, RULE 6 NOT GUILTY, RULE 4.01(a) DISMISSED & RULE 4.18 NOT GUILTY. FINE \$500 + \$125 = \$625
10/01/2008	10/1/08 \$3200 FOR 10/7/08 HEARING FEE PAID IN FULL #65003

### Hold Info

Powered by:



**Licensee: Lois Finifter**

**M.M. & T., Inc. T/a Joe's Place**

**6200 Reisterstown Road – Class "BD7" Beer, Wine & Liquor License**

**Violation of Rule 4.15 Gambling – September 2, 2015/August 15, 2015/July 28, 2015 – At approximately 9:00 PM, members of the Baltimore City Police Department's Vice Squad executed a search and seizure warrant in reference to an undercover illegal gambling investigation where Det. Akinwande and Det. Garrett had previously observed multiple pay outs on video slot gaming machines in the establishment on July 28, 2015 and August 15, 2015. Upon execution of the search and seizure warrant, Baltimore Police recovered: (1) 3 poker machine switches; (2) 3 power packs; (3) Poker machine mother boards; (4) Payout Slips; and (5) U.S. Currency Dollar amount: \$3,931.00.**

**Violation History:**

- **07/24/2014 Public Hearing Violation of Rule 4.01(a) (re Feb 7,2014 alcoholic beverage sold to an underage police cadet) GUILTY Fine \$500 Admin Fee \$125 Total \$625 14 days to pay**

**Board Decision:**



DEPARTMENT  
RE, MARYLAND

1 Crime / Incident <b>Execution of a Search and Seizure</b>	Attempt <input type="checkbox"/>	2 Complaint Number <b>6150900949</b>
3 Location of Offense / Incident (Exact Street Address) <b>6200 Reisterstown Road</b>		Page <b>1</b> of <b>3</b>
4 Date / Time Occurred <b>9/2/2015 @ 2100 hours</b>		5 Date / Time Reported <b>S/A #4</b>
11 Location Given by Dispatcher <b>On View</b>		12 Companion Report No
13 Case Status <input type="checkbox"/> Open <input checked="" type="checkbox"/> Closed	14 Case Disposition <input type="checkbox"/> Cleared <input checked="" type="checkbox"/> Not Cleared	15 Follow-up <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
16 Crime Code	17 Crime Classification	18 Describe Location of Offense or Type of Premise <b>Bar/Cut-Rate</b>
19 Reported by Crime Watch <input type="checkbox"/> Yes <input type="checkbox"/> No		

Person  Domestic Related  Gang Related  Juvenile Related  Hate Crime

Miscellaneous

6 Unit <b>4843</b>	7 Post of Occurrence <b>NW3</b>	8 Reporting Area	9 Street Code	10 CAD Number <b>3495</b>	11 Location Given by Dispatcher <b>On View</b>	12 Companion Report No
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20 Complainant / Victim Name (Last, First, MI) or Firm Name if Business <b>Detective O. Akinwande</b>	Residence / Address (Include City, County, State, Zip) <b>601 E. Fayette Street</b>	Sex	Race	Age	DOB
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Where Employed or School Attending (Include City Located) <b>Baltimore City Police Department</b>	Occupation <b>Detective</b>	Hours of Employment <b>varies</b>	Residence Phone <b>410-396-2411</b>	Other Phone	Sobriety
--	--------------------------------	--------------------------------------	--	-------------	----------

21 Injuries and Location on Body	Victim's Condition	Victim Hospitalized / Facility <input type="checkbox"/> Yes <input type="checkbox"/> No	22 Victim / Assailant Relationship	23 Current / Former Cohabit <input type="checkbox"/> Yes <input type="checkbox"/> No
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24 Reporting Person Name (Last, First, MI) <b>same as #20</b>	Sex	Race	Age	DOB	Address (Include City, County, State, Zip)	Residence Phone	Other Phone
---	-----	------	-----	-----	--	-----------------	-------------

25 Witness Parent/Guardian <input type="checkbox"/>	Name (Last, First, MI)	Address (Include City, County, State, Zip)	Residence Phone	Other Phone
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26 Suspect Name (Last, First, MI) <b>Joe's Place</b>	Address (Include City, County, State, Zip) <b>6200 Reisterstown Road</b>	Sex	Race	Age	DOB	Height	Weight
--	---	-----	------	-----	-----	--------	--------

Complexion	Hair Color/Length/Style	Hair	Eyes	Facial Hair	Teeth	Shirt/Coat
Pants	Shoes	Additional Descriptors (Tattoos, Piercings, Scars, Marks, Accent, etc.)				Arrest Number

27 Trademarks of Suspect(s) (Action / Conversation)	28 Point of Entry	29 Location Last Seen	30 Manner of Escape	31 Direction of Esc
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32 Weapon / Means of Attack	33 Method Used to Commit Crime	34 Type of Property Taken	35 Total Loss Value
-----------------------------	--------------------------------	---------------------------	---------------------

36 Vehicle Information	Suspect <input type="checkbox"/>	Victim <input type="checkbox"/>	Stolen <input type="checkbox"/>	Towed <input type="checkbox"/>	Other <input type="checkbox"/>	Tag Number	State	Expiration	Vehicle Year/Make	Model	Body Style/Color	Mileage		
Vehicle Identification Number (VIN)							Ignition Locked <input type="checkbox"/> Yes <input type="checkbox"/> No	Keys in Ignition <input type="checkbox"/> Yes <input type="checkbox"/> No	Doors Locked <input type="checkbox"/> Yes <input type="checkbox"/> No	Windows Closed <input type="checkbox"/> Yes <input type="checkbox"/> No	Radio in Car <input type="checkbox"/> Yes <input type="checkbox"/> No	Battery in Car <input type="checkbox"/> Yes <input type="checkbox"/> No	Spare Tire in Car <input type="checkbox"/> Yes <input type="checkbox"/> No	Trunk Locked <input type="checkbox"/> Yes <input type="checkbox"/> No

37 Registered Owner Name (Last, First, MI)	Sex	Race	Age	DOB	Address (Include City, County, State, Zip)
--	-----	------	-----	-----	--

38 Recovered by	39 Method of Theft	40 Evidence of Stripping / Tampering	41 Repo Check <input type="checkbox"/> Yes <input type="checkbox"/> No	42 Tow List Check <input type="checkbox"/> Yes <input type="checkbox"/> No	43 Owner Notif <input type="checkbox"/> Yes <input type="checkbox"/> No
-----------------	--------------------	--------------------------------------	---	---	--

44 Tow Information	Location Towed From	Location Towed To	Towed by	Tow Truck Operator Signature
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45 Detective Notified	Sequence No	Assignment	Unit Number	Date	Time	46 Medical Examiner Notified	Date	Time
-----------------------	-------------	------------	-------------	------	------	------------------------------	------	------

47 Crime Lab Technician Name	Unit Number	Time	48 Hot Desk Person Notified	Time
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49 Communications Supervisor Notified <input type="checkbox"/> Yes <input type="checkbox"/> No	50 Citywide Broadcast <input type="checkbox"/> Yes <input type="checkbox"/> No	Time	51 Victim Assistance/Incident Information Form(s) Provided <input type="checkbox"/> Yes <input type="checkbox"/> No
---	---	------	--

52 Copies Forwarded To <b>Liquor Board</b>
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Cont'd Sections	Narrative: (1) Continuation of any preceding items. (2) Property Listing, to include property taken and seized/submitted evidence/property; list property inventory number(s) when applicable. (3) Describe details of incident. Include all steps taken in preliminary investigation. (4) List all additional notifications, including name, agency or assignment, unit number, telephone number, date time. (5) List all arrests, including Arrest Numbers and charges.
	Corporation: <b>M.M&amp;T., Inc.</b>
	Trade Name: <b>Joe's Place</b>
	Address: <b>6200 Reisterstown Road</b>
	Licensee: <b>Lois Smith Finifter</b>

Contin

53 Reporting Officer Name (PRINT CLEARLY) <b>Detective O. Akinwande</b>	Sequence No <b>1234</b>	Assignment <b>SES-Vice</b>	Signature 
--	----------------------------	-------------------------------	---------------

54 Approving Supervisor Rank and Name <b>Sgt C. Liesher</b>	Sequence No <b>G307</b>	Assignment <b>SES-Vice</b>	Signature 
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55 RMS Data Entered By	Sequence No	Date	Time	56 Reviewer	57 Referred To
------------------------	-------------	------	------	-------------	----------------

POLICE DEPARTMENT  
BALTIMORE, MARYLAND

1 Crime / Incident Execution of a Search and Seizure <input type="checkbox"/>	Attempt <input type="checkbox"/>	2 Complainant Number 6150900949
3 Location of Offense / Incident (Street Address, Zip) 6200 Reisterstown Road		Page 2 of 3
4 Date / Time of This Report 9/2/2015 @ 2100 hours		5 Arrest / Custody Number

Continuation  Follow Up

Person  Property  Miscellaneous  Vehicle  Missing Person  Custody

8 Unit 4843	7 Post of Occurrence NW3	9 Reporting Area	9 Street Code	10 CAD Number 3495	11 Original Report Date / Time S/A # 4	12 Offense / Incident Changed From
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13 Case Status <input type="checkbox"/> Open <input checked="" type="checkbox"/> Closed	14 Multiple Clearance <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	15 Case Disposition <input checked="" type="checkbox"/> Cleared <input type="checkbox"/> Not Cleared	16 Follow-up <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	17 Crime Code	18 Crime Classification
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19 Complainant / Victim Name (Last, First, MI), or Firm Name of Business Detective O. Akinwande	Residence / Address (Include City, County, State, Zip) 601 E. Fayette Street	Sex	Race	Age	DOB
---	---	-----	------	-----	-----

20 Copies Forwarded To  
Liquor Board

21 Cont'd Sections Narrative: (1) Continuation of any preceding reports. (2) Property Listing, to include property taken and seized/submitted evidence/property; list property inventory number(s) when applicable. (3) Record all activity and all developments in case subsequent to last report. Include names and arrest numbers of all persons arrested. Explain any crime/incident classification change. (4) List all additional notifications, including name, agency or assignment, unit number, telephone number, date, time. (5) Recommend case status when applicable. (6) If Multiple Clearance, include all affected complainant case numbers.

**Property Recovered**

- 1) Three poker machines switches
- 2) Three power packs
- 3) Poker machines mother boards
- 4) Payout slips
- 5) U.S currency Dollar AMT: \$3931.00

Raid Team: Sgt. Leisher  
 Det. Akinwande (Affiant)  
 Det. Garrett (Co-Affiant)  
 Det. Gatto  
 Det. Greenhill

Warrant: Signed by the Honorable Judge James H. Green of District Court on August 26th 2015.  
 Affiant: Det. O. Akinwande. Co-Affiant: J. Garrett  
 Forced Entry: No  
 Photos: 33

On September 2nd 2015, Detective O. Akinwande along with members of the Baltimore City SES-Vice squad executed a search and seizure warrant upon the premises of 6200 Reisterstown Road.

The premise was open for business with approximately six patrons. The bartender later identified as Denise Rashanda Stephenson (B/F 9-29-1990) and The Bar Manager Henry Alex Smith (W/F 11/18/1960) were in operational control of the premises.

Mrs. Stephenson was found behind the bar, while Mr. Smith was found in the cut-rate part of the establishment. Both Mrs. Stephenson and Mr. Smith were read their rights and notified the purpose of the search and seizure warrant.

The warrant was signed on August 26th 2015. by the Honorable Judge James H. Green of District Court, in reference to an undercover gambling investigation where Det. Akinwande and Det. Garrett observed multiple pay outs on video slot gaming machines in the establishment.

21 I affirm and declare that the statements above are true to the best of my knowledge:				Reporting Person's Signature	Date
22 Reporting Officer Name (PRINT CLEARLY) Det. O. Akinwande		Sequence No 1234	Assignment SES-Vice	Signature <i>O. Akinwande</i>	
23 Approving Supervisor Rank and Name Sgt C. Leisher		Sequence No G307	Assignment SES-Vice	Signature <i>C. Leisher</i>	
24 RMS Data Entered By	Sequence No	Date	Time	25 Reviewer	26 Referred To

POLICE DEPARTMENT  
BALTIMORE, MARYLAND

1 Crime / Incident Execution of a Search and Seizure <input type="checkbox"/>		Attempt <input type="checkbox"/>		2 Complaint Number 6150900949	
3 Location of Offense / Incident (Street Address, Zip) 6200 Reisterstown Road				Page 3 of 3	
4 Date / Time of This Report 9/2/2015 @ 2100 hours			5 Arrest / Custody Number		
8 Unit 4843		7 Post of Occurrence NW3		6 Reporting Area	
9 Street Code		10 CAD Number 3495		11 Original Report Date / Time S/A # 4	
12 Offense / Incident Changed From		13 Case Status <input type="checkbox"/> Open <input checked="" type="checkbox"/> Closed		14 Multiple Clearance <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
15 Case Disposition <input checked="" type="checkbox"/> Cleared <input type="checkbox"/> Not Cleared		16 Follow-up <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		17 Crime Code	
18 Crime Classification		19 Complainant / Victim Name (Last, First, MI), or Firm Name if Business Detective O. Akinwande		Residence / Address (Include City, County, State, Zip) 601 E. Fayette Street	
Sex		Race		Age	
DOB					

Continuation  Follow Up

Person  Property  Miscellaneous  Vehicle  Missing Person  Custody

20 Copies Forwarded To Liquor Board	
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Cont'd Sections Narrative (1) Continuation of any preceding reports. (2) Property Listing, to include property taken and seized/submitted evidence/property list property inventory number(s) when applicable. (3) Record all activity and all developments in case subsequent to last report. Include names and arrest numbers of all persons arrested. Explain any crime/incident classification change. (4) List all additional notifications, including name, agency or assignment, unit number, telephone number, date. (5) Recommend case status when applicable. (6) If Multiple Clearance, include all affected complaint/case numbers.

As a result the above listed property was seized and submitted to the Baltimore City Police Evidence Control Unit.

While Mr. Smith was talking to Sgt. Leisher in the back office, Sgt. Leisher advised me that he noticed Mr. Smith reach down into a box located on the back shelf of the room, removed something and put it in his back left pocket. I asked Mr. Smith if he was armed, he was cooperative and notified me that a gun was in his back left pocket. I asked Mr. Smith to put his hands on his head in order to search him for officer's safety. I recovered a loaded 38 Smith and Wesson serial # DAV6091 revolver in Mr. Smith's front right pants pocket. When asked if there were any other weapons in the establishment, Mr. Smith admitted there were two other hand guns on the back shelf. Det. Garrett recovered one 357 Smith and Wesson Magnum Serial# CHK2859 and a Glock 19 serial# DN128. All weapons were ran and came back not stolen therefore they were released back to Mr. Smith.

Mr. Smith was asked if he had the key to access the safes for the three Video gaming machines, he mentioned that he didn't have the key however "the machine guy", later identified as Gary Richard Scherr (W/M) was notified to open the machines. Approximately 20 minutes later Mr. Scherr and open the lock to all three Machines.

Mr. Smith was asked if he had any payout slips for the video poker machines, he advised me that he had no payouts from this night however had had payout slips from other nights. Mr. Smith then showed me where he kept the slips. I recovered seven payout slips from a box at the bottom of a shelf in the back of the establishment's office.

US currency was seized from the following: \$105.00 from Video gaming machine #1, \$253.00 from Video gaming machine #2, \$171.00 from video gaming machine #3, \$163.00 from the lottery machine \$301.00 from the middle bar register, \$448.00 from the front register, \$2475.00 from the back room Office . The video gaming slot machine motherboards, CPUs and switches were recovered from their respective machines.

The raid was concluded at approximately 2330 hours. Mr. Smith was given a copy of the Warrant and left in charge of the establishment.

Continued

21 I affirm and declare that the statements above are true to the best of my knowledge:		Reporting Person's Signature		Date
22 Reporting Officer Name (PRINT CLEARLY) Det. O. Akinwande		Sequence No. 1234	Assignment SES-Vice	Signature 
23 Approving Supervisor Rank and Name Sgt C. Leisher		Sequence No. G307	Assignment SES-Vice	Signature 
24 RMS Data Entered By	Sequence No.	Date	Time	25 Reviewer
				26 Referred To

State of Maryland

Board of Liquor License Commissioners

for Baltimore City  
231 E. Baltimore Street, 6<sup>th</sup> Floor  
Baltimore, Maryland, 21202-3258  
Phone: (410) 396-4377

**NOTICE**

To: M.M & T., Inc  
T/A Joe's Place  
6200 Reisterstown Road

Date: September 29, 2015

**Licensee may be represented by  
Counsel before board**

You are hereby notified to appear before the Board of Liquor License Commissioners for Baltimore City at 1 o'clock PM on the 15th day of October, 2015, in Room 215, City Hall, Baltimore Maryland to show cause why your Alcoholic Beverages License and other permits issued by this Board to you under the provisions of Article 2B of the Annotated Code of Maryland Title of "Alcoholic Beverages", as amended, should not be suspended or revoked as required by this Board by Section 10-401 of said Article, following your conviction and/or violation of said law, to wit:

**Location of Incident:** Joe's Place, 6200 Reisterstown Road, Baltimore, MD ("the establishment")

**Violation of Rule 4.15 Gambling – September 2, 2015/August 15, 2015/July 28, 2015** – At approximately 9:00 PM, members of the Baltimore City Police Department's Vice Squad executed a search and seizure warrant in reference to an undercover illegal gambling investigation where Det. Akinwande and Det. Garrett had previously observed multiple pay outs on video slot gaming machines in the establishment on July 28, 2015 and August 15, 2015. Upon execution of the search and seizure warrant, Baltimore Police recovered: (1) 3 poker machine switches; (2) 3 power packs; (3) Poker machine mother boards; (4) Payout Slips; and (5) U.S. Currency Dollar amount: \$3,931.00.

**City Hall security provisions require all persons entering the City Hall to present a photo ID.**

If you fail to appear at the time and place designated above, the board will proceed with the hearing and will take such action regarding the suspension or revocation of your license and permits as warranted by evidence. If you have any questions concerning the specific rules or code cited, please refer to Rules and Regulations for the Board of Liquor License Commissioners for Baltimore City or Article 2B of the Annotated Code of Maryland for reference purposes.

BY ORDER OF THE BOARD OF LIQUOR LICENSE  
COMMISSIONERS FOR BALTIMORE CITY

**Benjamin Neil, Esq., Chairman**

BOARD OF LIQUOR LICENSE  
COMMISSIONERS

**FOR BALTIMORE CITY**

**NOTICE**

**TO**

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Service of copy admitted at \_\_\_\_\_

This \_\_\_\_\_ day of \_\_\_\_\_

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Served by: \_\_\_\_\_



## Liquor Board System

Version 1.0

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

### License Detail

[<< Go Back](#)

#### License Info

License Num: LBD7 053

Cert Num: 0133

Fee: \$1,320.00 Status: Renewed

License Date: 5/1/2015

License Year: 2015

CR Number: 04835352

Payment Date: 04-21-15

2014 - 2015 TPP Paid 2015 Trader's License 

### Add Adult Entertainment License

#### Location

Corp Name: M. M. &amp; T., INC.

Trade Name: JOE'S PLACE

Zone Code: 49

Phone: 410-358-5833

Block Num: 6200  
City: BALTIMOREStreet: REISTERSTOWN ROAD  
State: MD Zip: 21215

CR Number: 04835352

#### Portion of Business Used:

FIRST FLOOR FOR BUSINESS &amp; LEFT SIDE OF BASEMENT FOR STORAGE (CHANGE OF OWNERSHIP)

#### Restriction:

THERE IS TO BE NO SEPARATE PACKAGE GOODS STORE OR DEPARTMENT. ALL PACKAGE GOODS ARE TO BE SOLD OVER THE BAR.

### License Owners

First Name	Last Name	Street	City	State	Zip
LOIS SMITH	FINIFTER	6200 REISTERSTOWN ROAD	BALTIMORE	MD	21215

### Comments

Date	Comment
07/30/2014	07/24/2014 Public Hearing Violation of Rule 4.01(a) (re Feb 7, 2014 alcoholic beverage sold to an underage police cadet) GUILTY Fine \$500 Admin Fee \$125 Total \$625 14 days to pay
03/21/2014	03/06/2014 Public Hearing re: Application to transfer ownership from personal representative Board APPROVED transfer



03/21/2014	02/27/2014 Public Hearing re: Application to transfer ownership from personal representative Board POSTPONED hearing due to incomplete application.
07/21/2006	07/20/06 Public Hearing re: Violation of rule 4.1(a) DECISION: GUILTY \$500/SUSPENDED \$200.FINE \$300 OR 3 DAYS + \$125 ADM.FEE = \$425
03/01/2004	10/23/93 Licensee and patrons involved in dispute CC 6J-19225 11/23/93 Man identified as bar owner involved in dispute with 1 patron and threatened by patron CC 6K-19961

**Hold Info**

Powered by:

