

Lincoln Police Department
James Peschong, Chief of Police
575 South 10th Street
Lincoln, Nebraska 68508

402-441-7204
fax: 402-441-8492



MAYOR CHRIS BEUTLER

lincoln.ne.gov

May 8, 2012

Mayor Beutler and City Council
City of Lincoln
City County Building
Lincoln, NE

Mayor Beutler and Members of the City Council:

An investigation has been made regarding the application of La Fiesta Sports Bar, holder of liquor license C-72994.

This location was known as Sidetrack Tavern which held a class C liquor license.

La Fiesta is moving from 1037 'L' Street to 935 'O' Street and they are requesting that a change of location be approved for the liquor license.

The manager of the license will remain the same.

Stockholder information has been included for your review.

The required training has been completed.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.

JIM PESCHONG, Chief of Police



A nationally accredited law enforcement agency



APPLICATION FOR CHANGE OF LOCATION TO LIQUOR LICENSE

NEBRASKA LIQUOR CONTROL COMMISSION
301 CENTENNIAL MALL SOUTH
PO BOX 95046
LINCOLN, NE 68509-5046
PHONE: (402) 471-2571
FAX: (402) 471-2814
Website: www.lcc.ne.gov



Application needs to include the following:

- Must include processing fee of \$45.00 made payable to Nebraska Liquor Control Commission
- Must include a copy of the lease, deed or purchase agreement showing ownership of new location
 - Document must show ownership in name of licensee, if licensed as corporation or LLC must show that name
- Must include simple sketch showing new building, must include outside dimensions in feet (not square feet), direction north, if it's a one or two story building, if there is a basement. No blue prints.
- May include a letter of explanation

RS

LIQUOR LICENSE # 72994-C

LICENSEE NAME Tres Jalisquillos, Inc.

TRADE NAME La Fiesta Sport Bar

CURRENTLY LICENSED ADDRESS 1037 L Street, Suite A

CITY Lincoln, NE 68508

Lease 10/31/2013

CONTACT PERSON Manuel A. Perez, President

CONTACT PERSON PHONE NUMBER 402-202-8667

Change of location application will not be accepted if moving to a different jurisdiction (i.e. city or county), a new application will need to be filed.

Complete the following questions:

1. What is the new address? 935 O Street
2. City Lincoln County Lancaster
3. When do you expect on moving to new location? April 26, 2012

*CK #5167
\$45-mm*

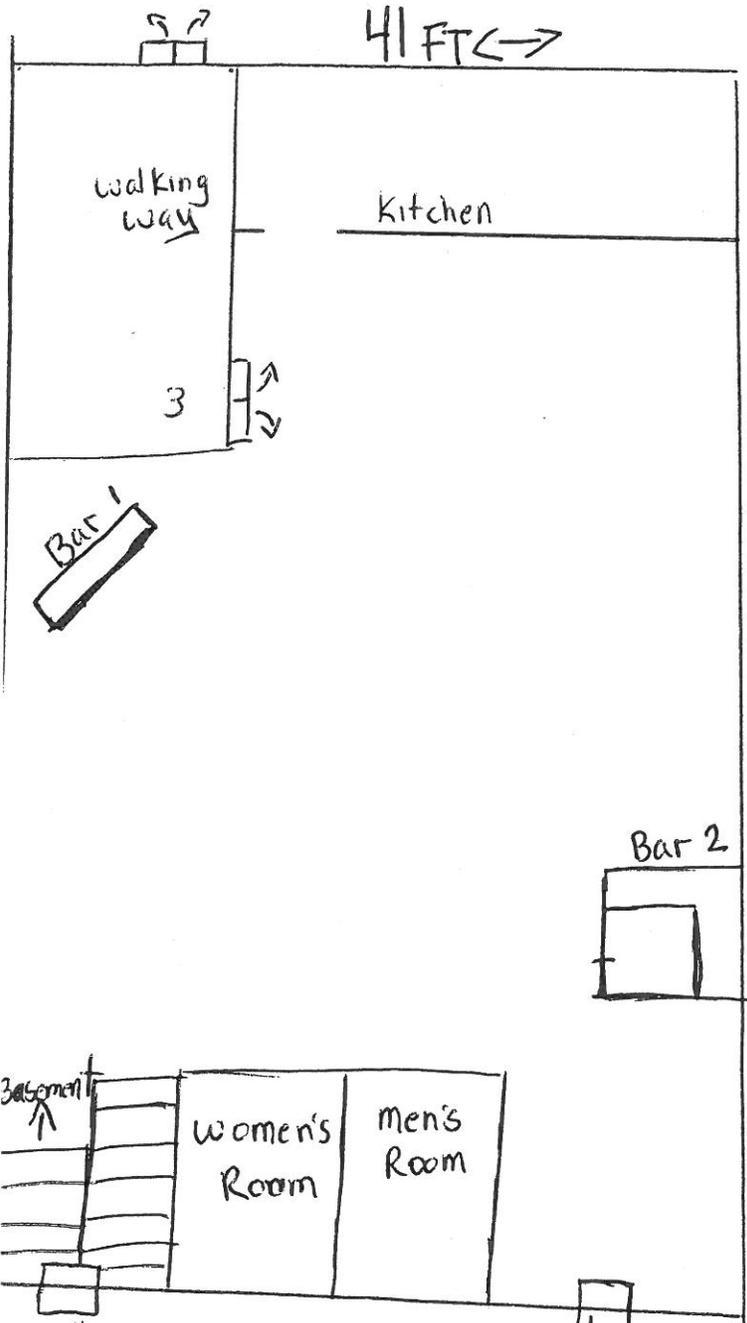
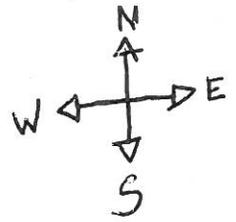
1
Received



935 "O" st

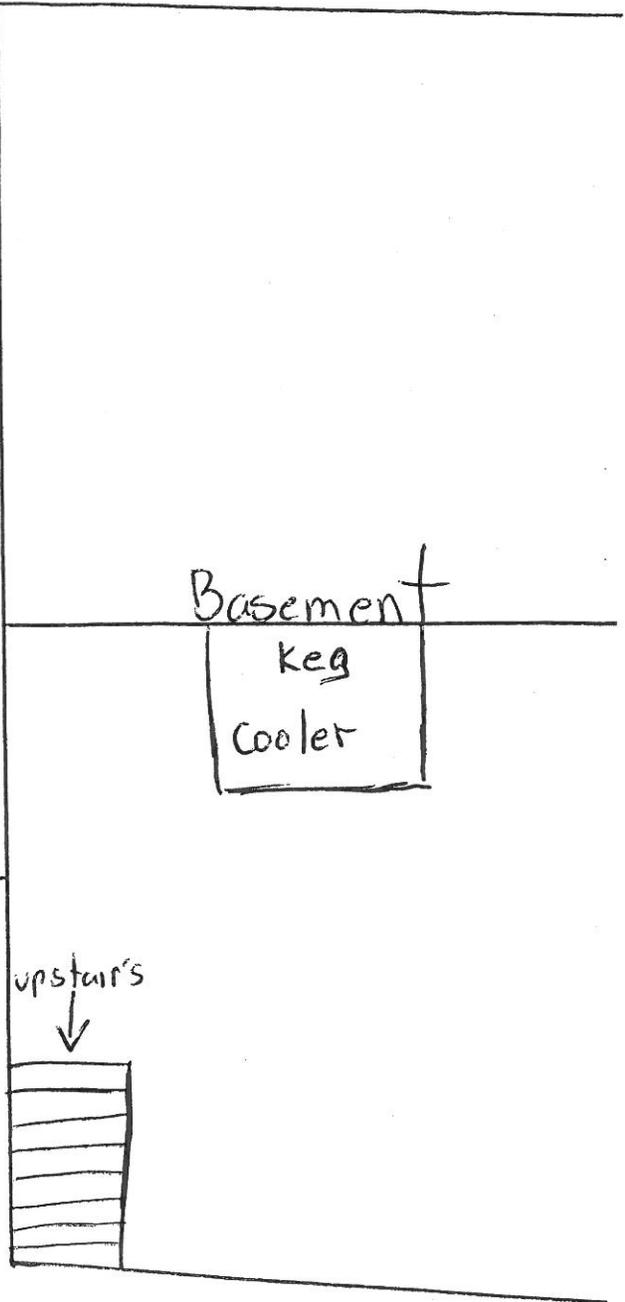
"O" st ↔

41 FT ↔



↑ 142 FT
↓

↑ 13 FT
↓



← 28 Ft →

↑
Basement

main floor

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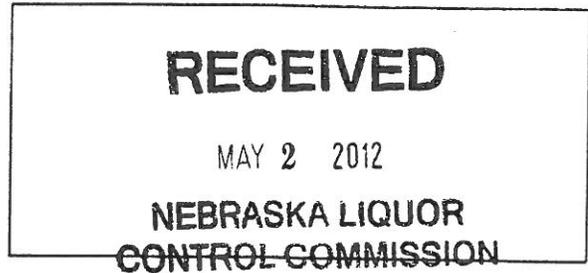
MAY 2 2012

NEBRASKA LIQUOR
CONTROL COMMISSION

**AFFIDAVIT FOR CHANGE
IN CORPORATE OFFICERS
AND/OR STOCKHOLDERS**

NEBRASKA LIQUOR CONTROL COMMISSION
301 CENTENNIAL MALL SOUTH
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F.Y.I.



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CORPORATE INFORMATION

Tres Jalisquillos, Inc.

Q - 72994

Corporate Name	Corporate Liquor License Number		
1037 L Street, Suite A	Lincoln	NE	68508
Corporate Address	City	State	Zip Code
Manuel Perez			402-202-8667
Corporate Contact	Contact Telephone Number		

CORPORATE OFFICERS *after completion of this corporate change, the officers will be as follows:*

PRESIDENT	Name: (Last, First, Middle) Perez, Manuel A.	Date of Birth	Social Security No.
	Home Address : (Street) 441 S. 44th Street	City, State, Zip Code Lincoln, NE 68510	
	Telephone Number 402-202-8667	Number of Shares 6,000	
	Name of Spouse: (Last, First, Middle) None	Date of Birth N/A	Social Security No. N/A

VICE PRESIDENT	Name: (Last, First, Middle) Luis, Eduardo	Date of Birth	Social Security No.
	Home Address : (Street) 2517 NW 55th Street	City, State, Zip Code Lincoln, NE 68524	
	Telephone Number 402-610-1000	Number of Shares 4,000	
	Name of Spouse: (Last, First, Middle) Alvarez, Obdulia	Date of Birth	Social Security No. N/A

SECRETARY	Name: (Last, First, Middle) Luis, Eduardo	Date of Birth	Social Security No.
	Home Address : (Street) 2517 NW 55th Street	City, State, Zip Code Lincoln, NE 68524	
	Telephone Number 402-610-1000	Number of Shares 4,000	
	Name of Spouse: (Last, First, Middle) Alvarez, Obdulia	Date of Birth	Social Security No. N/A

TREASURER	Name: (Last, First, Middle) Perez, Manuel A.	Date of Birth	Social Security No.
	Home Address : (Street) 441 S. 44th Street	City, State, Zip Code Lincoln, NE 68510	
	Telephone Number 402-202-8667	Number of Shares 6,000	
	Name of Spouse: (Last, First, Middle) None	Date of Birth N/A	Social Security No. N/A

FOR ADDITIONAL OFFICERS, STOCKHOLDERS OR DIRECTORS ATTACH ADDITIONAL SHEET(S) IF NECESSARY



1200008933

STOCKHOLDER	Name: (Last, First, Middle) Perez, Manuel A.	Date of Birth	Social Security No.
	Home Address: (Street) 441 S. 44th Street	City, State, Zip Code Lincoln, NE 68510	
	Telephone Number 402-202-8667	Number of Shares 6,000	
	Name of Spouse: (Last, First, Middle) None	Date of Birth N/A	Social Security No. N/A

DIRECTOR	Name: (Last, First, Middle) Perez, Manuel A.	Date of Birth	Social Security No.
	Home Address : (Street) 441 S. 44th Street	City, State, Zip Code Lincoln, NE 68510	
	Telephone Number 402-202-8667	Number of Shares 6,000	
	Name of Spouse: (Last, First, Middle) None	Date of Birth N/A	Social Security No. N/A

The following needs to be completed by any new officer(s) or stockholder(s).

1. Have you or your spouse ever been convicted of or plead guilty to any charge. Charge means any charge alleging a felony, misdemeanor, violation of a federal or state law; a violation of a local law, ordinance or resolution, or the name of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application.

YES NO

MAY 2 2012

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NEBRASKA LIQUOR CONTROL COMMISSION

If yes, complete the following:

Name: (Last, First, Middle)	Conviction Date	Charge	Disposition	Location
Luis, Eduardo	N/A	N/A	N/A	N/A

Fingerprints will be required for new president or stockholder(s) holding over 25% of new stock and their spouses. Affidavit of non-participation may be filed by the spouses in lieu of fingerprints. Fingerprint cards are available at the Liquor Control Commission office upon request; fingerprint cards must be filed with this affidavit along with processing fee of \$38 per person, checks made out to the Nebraska State Patrol.

Certification by Corporate Contact

Under penalty of perjury, I hereby certify that each officer and stockholder is the real party in interest with respect to his/her position and is not acting directly or indirectly as agent, employee or representative of any other person not reported. The undersigned certifies on behalf of the corporation that it is understood that a misrepresentation of fact is cause for rejection of this application or suspension, cancellation or revocation of any license issued.

Maunel A Perez

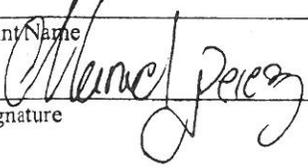
President

Print Name

Title

Signature

Date



5-2-12

STOCKHOLDER	Name: (Last, First, Middle) Luis, Eduardo	Date of Birth	Social Security No.
	Home Address: (Street) 2517 NW 55th Street	City, State, Zip Code Lincoln, NE 68524	
	Telephone Number 402-610-1000	Number of Shares 4,000	
	Name of Spouse: (Last, First, Middle) Alvarez, Obdulia	Date of Birth	Social Security No. N/A

DIRECTOR	Name: (Last, First, Middle) Luis, Eduardo	Date of Birth	Social Security No.
	Home Address : (Street) 2517 NW 55th Street	City, State, Zip Code Lincoln, NE 68524	
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CONTROL COMMISSION**