

State of Arizona
Department of Liquor Licenses and Control

Created 12/07/2022 @ 03:18:15 PM

Local Governing Body Report

LICENSE

Number:	Type:	010 BEER AND WINE STORE
Name:	CARNICERIA SONORA #4 INC-	
State:	Pending	
Issue Date:	Expiration Date:	
Original Issue Date:		
Location:	19590 N MARICOPA ROAD MARICOPA, AZ 85139 USA	
Mailing Address:	3135 S 48TH STREET STE 107 TEMPE, AZ 85282 USA	
Phone:	(602)431-0063	
Alt. Phone:	(480)319-5948	
Email:	MARTHACSONORA@HOTMAIL.COM	

AGENT

Name:	OSCAR JIMENEZ MADRID
Gender:	Male
Correspondence Address:	3135 S 48TH STREET STE 107 TEMPE, AZ 85282 USA
Phone:	(480)319-5948
Alt. Phone:	
Email:	MARTHACSONORA@HOTMAIL.COM

OWNER

Name: CARNICERIA SONORA #4 INC
Contact Name: OSCAR JIMENEZ MADRID
Type: CORPORATION
AZ CC File Number: 23403600 State of Incorporation: AZ
Incorporation Date: 08/01/2022
Correspondence Address: 3135 S 48TH STREET
STE 107
TEMPE, AZ 85282
USA
Phone: (480)319-5948
Alt. Phone:
Email: MARTHACSONORA@HOTMAIL.COM

Officers / Stockholders

Name:	Title:	% Interest:
MARTHA JIMENEZ	Director	50.00
OSCAR JIMENEZ MADRID	Director	50.00

CARNICERIA SONORA #4 INC - Director

Name: OSCAR JIMENEZ MADRID
Gender: Male
Correspondence Address: 3135 S 48TH STREET
STE 107
TEMPE, AZ 85282
USA
Phone: (480)319-5948
Alt. Phone:
Email: MARTHACSONORA@HOTMAIL.COM

CARNICERIA SONORA #4 INC - Director

Name: MARTHA JIMENEZ
Gender: Female
Correspondence Address: 3135 S 48TH STREET
STE 107
TEMPE, AZ 85282
USA
Phone: (480)319-5948
Alt. Phone:
Email: MARTHACSONORA@HOTMAIL.COM

APPLICATION INFORMATION

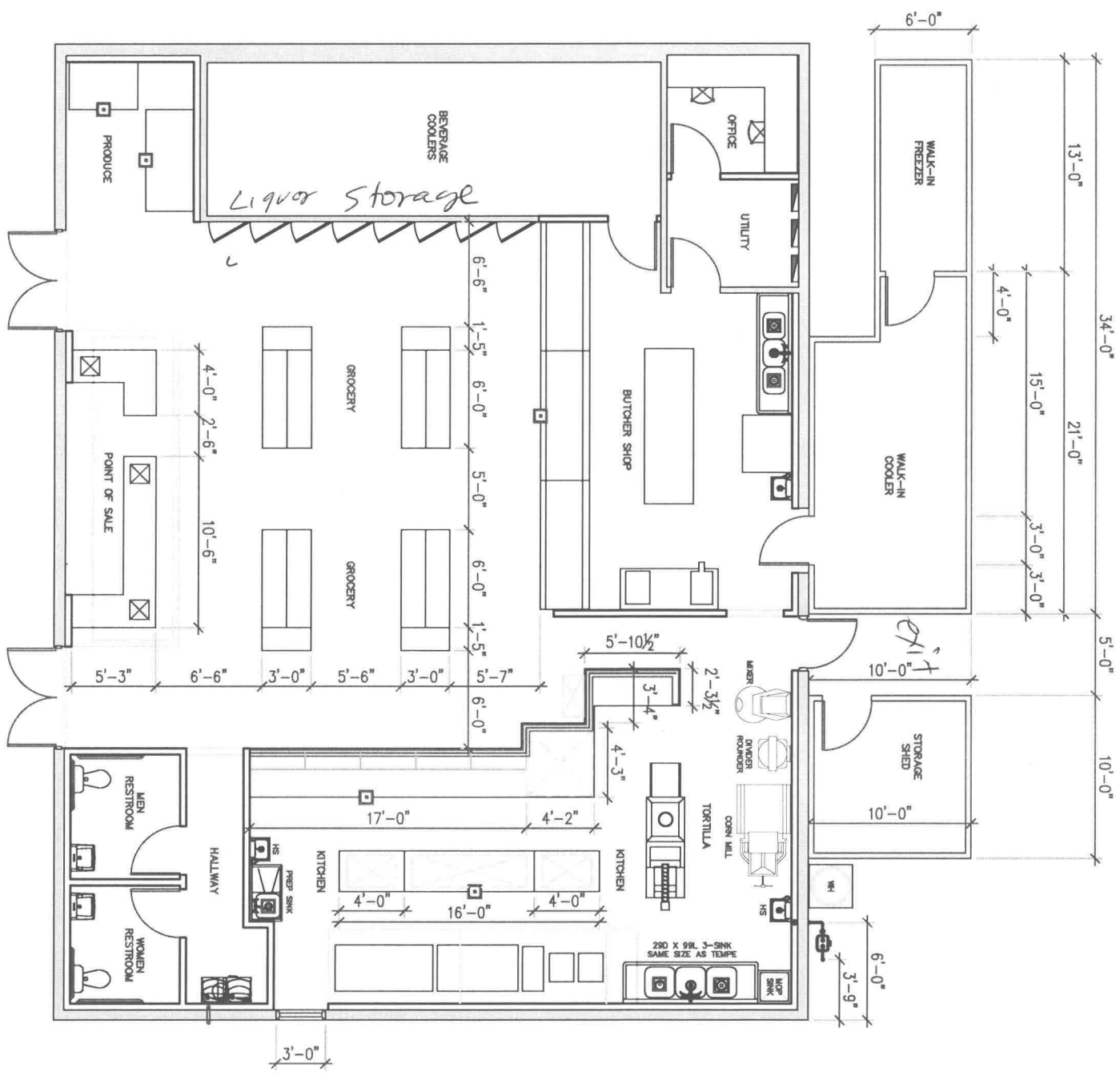
Application Number: 218518
Application Type: New Application
Created Date: 11/22/2022

QUESTIONS & ANSWERS

010 Beer and Wine Store

- 1) Are you applying for an Interim Permit (INP)?
No
- 2) Provide name, address, and distance of nearest school.
(If less than one (1) mile note footage)
MARICOPA HIGH SCHOOL 45012 W HONEYCUTT AVE MARICOPA, AZ 85139 2 MILES
- 3) Are you one of the following? Please indicate below.
Property Tenant
Subtenant
Property Owner
Property Purchaser
Property Management Company
PROPERTY TENANT
- 4) Is there a penalty if lease is not fulfilled?
Yes
What is the penalty?
19000
- 5) Is the Business located within the incorporated limits of the city or town of which it is located?
Yes
- 6) What is the total money borrowed for the business not including the lease?
Please list each amount owed to lenders/individuals.
ZERO
- 7) Are there walk-up or drive-through windows on the premises?
No
- 8) Does the establishment have a patio?
Yes
Is the patio contiguous or non-contiguous?
CONTIGUOUS PATIO
- 9) Is your licensed premises now closed due to construction, renovation or redesign or rebuild?
Yes
If yes, what is your estimated completion date?
12/01/2022

2800 Sq



Entrance LATEST FLOOR PLAN exit
7/22/22

CSR: _____
Amount: _____

22 NOV 22 14:11 PM 3 08



AGENT/CONTROLLING PERSON QUESTIONNAIRE

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

Type or Print with Black Ink

DLLC USE ONLY

Job #: 218518
Date Accepted: 12-01-2022
CSR: SE

License Number: _____

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

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

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

1. Check the
Appropriate
Box →



Agent



Controlling Person

2. Name: Jimenez Oscar Birth Date: [REDACTED] (NOT a public record)

3. Social Security: [REDACTED] Drivers License: [REDACTED] State Issued: 08/22/18

4. Place of birth: Mexico Sonora Mexico Height: 5'10" Weight: 204 Eyes: brown Hair: Gray
City State COUNTRY

5. Name of current/most recent spouse: Jimenez Martha Birth Date: [REDACTED]
Last First Middle

6. Are you a bonafide resident of Arizona? Yes ☒ No ☐ If yes, what is your date of residency? 1988 1971

7. Daytime telephone number: 480 319-5948 Email address: marthacsonora@hotmail.com

8. Premises Name: Carniceria Sonora #4 Inc Business Phone: 602 431 0063

9. Premises Address: 19590 N Maricopa Rd Maricopa Az 85139 Pinal
Street (do not use PO Box) City State County Zip

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

FROM Month/Year	TO Month/Year	DESCRIBE POSITION OR BUSINESS	EMPLOYERS NAME OR NAME OF BUSINESS (Street Address, City, State & Zip)
1994 March	CURRENT	owner	Carniceria Sonora #1 Inc 3135 S 48th St Ste 107 Tempe AZ 85282

(ATTACH ADDITIONAL SHEET IF NECESSARY)

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

FROM Month/Year	To Month/Year	Street	City	State	Zip
10/2016	CURRENT	1872 S Comanche Dr	Chandler	Az	85286

(ATTACH ADDITIONAL SHEET IF NECESSARY)

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

If you answered "YES" to any Question 14 through 18 YOU MUST attach a signed statement. Give complete details including dates, agencies involved and dispositions.

CHANGES TO QUESTIONS 14-18 MAY NOT BE ACCEPTED

I, (Print Full Name) Oscar Jimenez hereby swear under penalty of perjury and in compliance with A.R.S. § 4-210(A)(2) and (3) that I have read and understand the foregoing and verify that the information and statements that I have made herein are true and correct to the best of my knowledge.

Signature: [Signature] Date: 11/09/22



ALIEN STATUS

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

Type or Print with **Black Ink**

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

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

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

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

SECTION I – APPLICANT INFORMATION

APPLICANT NAME (Print or type)

mpdnd
Oscar Jimenez

SECTION II – CITIZENSHIP OR NATIONAL STATUS DECLARATION

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

City San Luis Sonora State _____ COUNTRY Mexico

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

2) Name of document: Passport Az Drivers License

If you answered **No**, you must complete Sections III.

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

22 NOV 22 14:11:03

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

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

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

SECTION III – QUALIFIED ALIEN DECLARATION

*22 NOV 22 14:04 PM 3 138

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

Name of document provided

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

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

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

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

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

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

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

- 11. A nonimmigrant whose visa for entry is related to employment in the United States, or
- 12. A citizen of a freely associated state, if section 141 of the applicable compact of free association approved in Public Law 99-239 or 99-658 (or a successor provision) is in effect [Freely Associated States include the Republic of the Marshall Islands, Republic of Palau and the Federate States of Micronesia, 48 U.S.C. § 1901 et seq.];
- 13. A foreign national not physically present in the United States.
- 14. **Otherwise Lawfully Present**
- 15. A person not described in categories 1-13 who is otherwise lawfully present in the United States.

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

Oscar Jimenez *Madrid*

Print Name

Oscar Jimenez
Signature

11/22/22
Date

22 NOV 22 149. LIT. PM 3 08

ARIZONA

DRIVER LICENSE

USA

NOT FOR FEDERAL IDENTIFICATION



9 CLASS D
9a END NONE
1a REST NONE
1 JIMENEZ MADRID
2 OSCAR
6 1872 S COMANCHE DR
CHANDLER, AZ 85286-6452

4b EXP 05/10/2023 4a ISS 08/22/2018
15 SEX M 16 EYES BRO
16 HGT 5'-10" 17 HAIR GRY
17 WGT 204 lb

Deer



CLASS: D-Operator
ENDORSEMENTS:
None

RESTRICTIONS:
None

Rev 02/14/2014

You Must Report a
Change of Address
Within 10 Days



CSR:

Amount:

*22 NOV 22 Lic. Lic. PM 3:38



AGENT/CONTROLLING PERSON QUESTIONNAIRE

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

Type or Print with Black Ink

DLLC USE ONLY

Job #:	218518
Date Accepted:	12-07-2022
CSR:	SK

License Number:

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

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

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

1. Check the
Appropriate
Box →

MS ☒

Agent

☒

Controlling Person

2. Name: JIMENEZ MARTHA Birth Date: [REDACTED] (NOT a public record)

3. Social Security #: [REDACTED] First [REDACTED] Last [REDACTED] State Issued: ARIZONA

4. Place of birth: MEXICO Height: 5'3 Weight: 130 Eyes: green Hair: brown

5. Name of current/most recent spouse: JIMENEZ Oscar Birth Date: [REDACTED] (NOT a public record)

6. Are you a bonafide resident of Arizona? Yes ☒ No ☐ If yes, what is your date of residency? 1988

7. Daytime telephone number: 480 319 5948 Email address: marthacsonora@hotmail.com

8. Premises Name: CARNICERIA SONORA #4 INC Business Phone: 602, 431, 0063

9. Premises Address: 19590 N Maricopa Rd Maricopa AZ 85139 Pinal

Street (do not use PO Box) City State County Zip

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

22 NOV 22 Lic. Lic. PM 3:38

FROM Month/Year	TO Month/Year	DESCRIBE POSITION OR BUSINESS	EMPLOYERS NAME OR NAME OF BUSINESS (Street Address, City, State & Zip)
	CURRENT		
1994	Current	Owner	Carniceria Sonora #1 INC 3135 S 48th St Tempe, AZ 85282

(ATTACH ADDITIONAL SHEET IF NECESSARY)

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

FROM Month/Year	To Month/Year	Street	City	State	Zip
2016	CURRENT	1872 S Comanche Dr.	Chandler	AZ	85286
Oct					

(ATTACH ADDITIONAL SHEET IF NECESSARY)

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

If you answered "YES" to any Question 14 through 18 YOU MUST attach a signed statement. Give complete details including dates, agencies involved and dispositions.

CHANGES TO QUESTIONS 14-18 MAY NOT BE ACCEPTED

I, (Print Full Name) MARTHA JIMENEZ hereby swear under penalty of perjury and in compliance with A.R.S. § 4-210(A)(2) and (3) that I have read and understand the foregoing and verify that the information and statements that I have made herein are true and correct to the best of my knowledge.

Signature: [Signature] Date: 11/09/22