

October 11, 2018

**Licensee(s):** Aklilu Gebre and Yosief Tesfazion  
Wehazit, Inc., T/a Opposite Sidewalk Saloon  
132 S. Carey Street 21223

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

**Violation of Rule 4.20(c)(ii) Class BD7 Licensees: Open and Operating Tavern at all Times – August 23, 2018**

– At approximately 10:00 PM, members of the Baltimore City Police Department's Vice Unit and members of the BLLC's Inspection Division conducted an undercover investigation of this establishment to determine if staff would grant access to the tavern portion of the licensed premises to patrons. At this time, Inspector Andy Perez entered the establishment in an undercover capacity and attempted to gain access to the tavern portion of the premise. Mr. Tedros Solomon, who was the attendant present at the location, told Perez "I don't think so" when Perez was asked if he could "come back" to the bar. Perez left the establishment and informed members of the Vice Unit and BLLC inspection division of the violation. Members from each team entered the establishment and informed Mr. Solomon of the violation of Rule 4.20(c)(ii).

(a) **Service on Licensee(s):** Summons issued to the licensee(s) on 9/25/2018.

(b) **Witness Summoned:** Summons issued to Inspector Andy Perez on 9/25/2018. Summons issued to Baltimore City Police Dept.: Det. Lebrun on 9/25/2018.

(c) **Violation History of Current Corporation:** Licensee appeared before the Board on 4/19/2018 in reference to:

- Protest of Renewal
- Board voted to renew the license
- (3-0 vote)

Licensee appeared before the Board on 3/1/2018 in reference to:

- Violation of Rule 4.01(a) - Sales to Minors
- Guilty
- \$500 + \$125 admin fee
- \$625 total fine

Licensee appeared before the Board on 2/8/2018 in reference to:

- Violation Rule 4.20(c)(ii) - Open and Operating Tavern at all Times - \$350 fine
- Violation of Rule 3.09(a) - Rest Room Facilities and Health Regulations - Not Guilty - No fine
- Violation of Rule 4.17(a) - Storage - \$100 fine
- Violation of Rule 4.18(a) - Alterations - \$100 fine
- \$550 + \$125 admin fee
- \$675 total fine

Licensee appeared before the Board on 10/19/2017 in reference to:

- Violation Rule 4.20(c)(ii) - Open and Operating Tavern at all Times
- Guilty

- \$250 fine + \$125 admin fee
- \$375 total fine

(d) **License Transfer Date:** The license transferred to the above named corporation on 2/23/2017.

**Board's Decision:**

State of Maryland

Board of Liquor License Commissioners

for Baltimore City  
1 N. Charles Street, Suite 1500  
Baltimore, Maryland, 21201-3724  
Phone: (410) 396-4377

**NOTICE**

To: Wehazit, Inc.  
T/A Opposite Sidewalk Saloon  
132 South Carey Street

Date: September 24, 2018

**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 11th day of October 2018, 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 the Alcoholic Beverages Article, as amended, should not be suspended or revoked as required by this Board by Section 4-604 of said Article, following your conviction and/or violation of said law, to wit:

**Location of Incident:** T/A Opposite Sidewalk Saloon, 132 South Carey Street, Baltimore, MD ("the establishment").

**Violation of Rule 4.20(c)(ii) Class BD7 Licensees: Open and Operating Tavern at all Times – August 23, 2018** – At approximately 10:00 PM, members of the Baltimore City Police Department's Vice Unit and members of the BLLC's Inspection Division conducted an undercover investigation of this establishment to determine if staff would grant access to the tavern portion of the licensed premises to patrons. At this time, Inspector Andy Perez entered the establishment in an undercover capacity and attempted to gain access to the tavern portion of the premise. Mr. Tedros Solomon, who was the attendant present at the location, told Perez "I don't think so" when Perez was asked if he could "come back" to the bar. Perez left the establishment and informed members of the Vice Unit and BLLC inspection division of the violation. Members from each team entered the establishment and informed Mr. Solomon of the violation of Rule 4.20(c)(ii).

**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 the Alcoholic Beverages Article of the Annotated Code of Maryland for reference purposes. If you have any questions or concerns regarding this matter please contact Deputy Executive Secretary, Thomas R. Akras at 410-396-4377.**

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

**Albert Matricciani, Jr., Chairman**

BOARD OF LIQUOR LICENSE  
COMMISSIONERS  
FOR BALTIMORE CITY

INCIDENT REPORT

Form B

1150-25-56  
Revised 12/17

POLICE DEPARTMENT  
BALTIMORE, MARYLAND

|  |                                  |                                 |
|--|----------------------------------|---------------------------------|
| 1 Crime / Incident<br>Liquor Board Violation | Attempt <input type="checkbox"/> | 2 Complain Number<br>8180899013 |
|--|----------------------------------|---------------------------------|

Person     Property     Vehicle     Miscellaneous

Domestic Related     Gang Related     Juvenile Related     Hate Crime     Investigative Stop

|  |             |
|--|-------------|
| 3 Location of Offense / Incident (Exact Street Address)<br>132 S. Carey street | Page 1 of 2 |
|--|-------------|

|  |                                   |
|--|-----------------------------------|
| 4 Date / Time Occurred<br>8/23/18 2200 hours | 5 Date / Time Reported<br>same #4 |
|--|-----------------------------------|

|                |                             |                  |               |                       |   |                        |
|----------------|-----------------------------|------------------|---------------|-----------------------|---|------------------------|
| 6 Unit<br>4833 | 7 Post of Occurrence<br>933 | 8 Reporting Area | 9 Street Code | 10 CAD Number<br>3487 | 11 Location Given by Dispatcher<br>O.V. | 12 Companion Report No |
|----------------|-----------------------------|------------------|---------------|-----------------------|---|------------------------|

|  |   |   |               |                         |   |   |
|--|---|---|---------------|-------------------------|---|---|
| 13 Case Status<br><input type="checkbox"/> Open <input checked="" type="checkbox"/> Closed | 14 Case Disposition<br><input checked="" type="checkbox"/> Cleared <input type="checkbox"/> Not Cleared | 15 Follow-up<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | 16 Crime Code | 17 Crime Classification | 18 Describe Location of Offense or Type of Premise<br>City bar and tavern | 19 Reported by Crime Watcher<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|--|---|---|---------------|-------------------------|---|---|

|  |   |     |     |        |        |   |
|--|---|-----|-----|--------|--------|---|
| 20 Complainant/ Victim<br>Name (Last, First, MI) or Firm Name if Business<br>Detective R. Lebrun | Residence / Address (Include City County State Zip) | Age | DOB | Height | Weight | Gender<br><input type="checkbox"/> M <input type="checkbox"/> F |
|--|---|-----|-----|--------|--------|---|

|   |  |  |                          |   |
|---|--|--|--------------------------|---|
| Race: <input type="checkbox"/> Black <input type="checkbox"/> Asian or Pacific Islander Native <input type="checkbox"/> Other | Ethnicity <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Unknown | Limited English Proficient? <input type="checkbox"/> Yes <input type="checkbox"/> No | If yes, Primary Language | How did officer proceed? <input type="checkbox"/> Lang Line <input type="checkbox"/> Professional Interpreter <input type="checkbox"/> Qualified Bilingual Member |
|---|--|--|--------------------------|---|

|  |                         |                                |                                 |             |                 |
|--|-------------------------|--------------------------------|---------------------------------|-------------|-----------------|
| Where Employed or School Attending (Include City Located)<br>BPD | Occupation<br>Detective | Hours of Employment<br>various | Residence Phone<br>443-984-7080 | Other Phone | Sobriety<br>sbr |
|--|-------------------------|--------------------------------|---------------------------------|-------------|-----------------|

|                                  |                    |   |  |   |
|----------------------------------|--------------------|---|--|---|
| 21 Injuries and Location on Body | Victim's Condition | Victim Hospitalized Facility<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | 22 Victim / Assailant Relationship<br>none | 23 Current / Former Cohabitant<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|----------------------------------|--------------------|---|--|---|

|   |     |      |     |     |   |                 |             |
|---|-----|------|-----|-----|---|-----------------|-------------|
| 24 Reporting Person<br>Name (Last, First, MI)<br>Same #20 | Sex | Race | Age | DOB | Address (Include City County State Zip) | Residence Phone | Other Phone |
|---|-----|------|-----|-----|---|-----------------|-------------|

|                            |                        |   |                 |             |
|----------------------------|------------------------|---|-----------------|-------------|
| 25 Witness Parent/Guardian | Name (Last, First, MI) | Address (Include City County State Zip) | Residence Phone | Other Phone |
|----------------------------|------------------------|---|-----------------|-------------|

|   |   |           |     |        |        |  |
|---|---|-----------|-----|--------|--------|--|
| 26 Suspect<br>Name (Last, First, MI)<br>Solomon, Tedros | Address (Include City County State Zip) | Age<br>30 | DOB | Height | Weight | Gender<br><input checked="" type="checkbox"/> M <input type="checkbox"/> F |
|---|---|-----------|-----|--------|--------|--|

|   |  |  |                          |   |
|---|--|--|--------------------------|---|
| Race: <input type="checkbox"/> Black <input type="checkbox"/> Asian or Pacific Islander <input checked="" type="checkbox"/> Other | Ethnicity <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Unknown | Limited English Proficient? <input type="checkbox"/> Yes <input type="checkbox"/> No | If yes, Primary Language | How did officer proceed? <input type="checkbox"/> Lang Line <input type="checkbox"/> Professional Interpreter <input type="checkbox"/> Qualified Bilingual Member |
|---|--|--|--------------------------|---|

|            |                         |      |      |             |       |            |
|------------|-------------------------|------|------|-------------|-------|------------|
| Complexion | Hair Color/Length/Style | Hair | Eyes | Facial Hair | Teeth | Shirt/Coat |
|------------|-------------------------|------|------|-------------|-------|------------|

|       |       |   |                      |
|-------|-------|---|----------------------|
| Pants | Shoes | Additional Descriptors (Tattoos Piercings Scars, Marks, Accent, etc.) | Arrest Number<br>N/A |
|-------|-------|---|----------------------|

|   |                   |                       |                     |                        |
|---|-------------------|-----------------------|---------------------|------------------------|
| 27 Trademarks of Suspect(s) (Action / Conversation) | 28 Point of Entry | 29 Location Last Seen | 30 Manner of Escape | 31 Direction of Escape |
|---|-------------------|-----------------------|---------------------|------------------------|

|                             |  |                           |                     |
|-----------------------------|--|---------------------------|---------------------|
| 32 Weapon / Means of Attack | 33 Method Used to Commit Crime<br>Refusing service for bar | 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 Repd. 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 |
|-----------------|--------------------|--------------------------------------|---|--|--|

|                    |                     |                   |          |                              |
|--------------------|---------------------|-------------------|----------|------------------------------|
| 44 Tow Information | Location Towed From | Location Towed To | Towed by | Tow Truck Operator Signature |
|--------------------|---------------------|-------------------|----------|------------------------------|

|                       |                         |             |      |      |                              |      |      |
|-----------------------|-------------------------|-------------|------|------|------------------------------|------|------|
| 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 |
|------------------------------|-------------|------|-----------------------------|------|

|   |  |  |
|---|--|--|
| 49 Communications Supervisor Notified <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | 50 Citywide Broadcast Time <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | 51 Victim Assistance/Incident Information Explain N/A Form(s) Provided <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|---|--|--|

|                        |
|------------------------|
| 52 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 of preliminary investigation. (4) List all additional notifications, including name, agency or assignment, unit number, telephone number, date, time. (5) List incident, include all steps taken in |
|-----------------|--|

Corp: Wehazit  
T/A: Opposite sidewalk  
132 S. Carey street  
Baltimore, Md 21230  
LBD 356



Continued

|  |  |           |
|--|--|-----------|
| 53 Reporting Officer Name (PRINT CLEARLY)<br>Det R. Lebrun | Sequence No. / Assignment<br>G271 / Vice | Signature |
|--|--|-----------|

|  |  |           |
|--|--|-----------|
| 54 Approving Supervisor Rank and Name<br>Det Sgt C Leisher | Sequence No. / Assignment<br>G307 / Vice | Signature |
|--|--|-----------|

|                        |                     |      |             |                |
|------------------------|---------------------|------|-------------|----------------|
| 55 RMS Data Entered By | Sequence No. / Date | Time | 56 Reviewer | 57 Referred To |
|------------------------|---------------------|------|-------------|----------------|

REPORT SHOULD BE TYPED OR LEGIBLY PRINTED IN BLACK INK

POLICE DEPARTMENT  
BALTIMORE, MARYLAND

|  |                                    |  |
|--|------------------------------------|--|
| 1 Crime / Incident<br><b>Liquor Board Violation</b>                                  | Attempted <input type="checkbox"/> | 2 Complaint Number<br><b>8180909013</b>          |
| 3 Location of Offense / Incident (Street Address, Zip)<br><b>132 S. Carey street</b> |                                    | Page <b>2</b> of <b>2</b>                        |
| 4 Date / Time of This Report<br><b>8/23/18 2200 hours</b>                            |                                    | 5 Arrest / Custody Number<br><b>N/A</b>          |
| 6 Unit<br><b>4833</b>  |                                    | 7 Post of Occurrence<br><b>933</b>               |
| 8 Reporting Area   |                                    | 9 Street Code<br><b>3487</b>                     |
| 10 CAD Number  |                                    | 11 Original Report Date / Time<br><b>same #4</b> |
| 12 Offense / Incident Changed From   |                                    |  |

Continuation  Follow Up

Person  Property  Miscellaneous  Vehicle  Missing Person  Custody

|   |  |   |   |   |                         |
|---|--|---|---|---|-------------------------|
| 13 Case Status<br><input type="checkbox"/> Open <input checked="" type="checkbox"/> Closed  | 14 Multiple Clearance<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | 15 Case Disposition<br><input checked="" type="checkbox"/> Cleared <input type="checkbox"/> Not Cleared | 16 Follow-up<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | 17 Crime Code   | 18 Crime Classification |
| 19 Complainant / Victim<br><b>Det R Lebrun</b>  |  | Residence / Address (Include City, County, State, Zip)<br><b>242 W 29th street</b>                      |   | Sex   | Age DOB                 |
| Race<br><input type="checkbox"/> Black <input type="checkbox"/> White <input type="checkbox"/> Asian or Pacific Islander <input type="checkbox"/> Native American/Alaskan Native <input type="checkbox"/> Other |  | Gender<br><input type="checkbox"/> Male <input type="checkbox"/> Female                                 |   | Ethnicity<br><input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino <input type="checkbox"/> Unknown |                         |
| 20 Copies Forwarded To  |  |   |   |   |                         |

21 Narrative: (1) Continuation of any preceding items. (2) Property Listing, to include property taken and seized/submitted evidence/property #s; property inventory numbers, 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 changes. (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 complaint/case numbers.

**BWC used during incident. G308, G271**

On 8-23/18 at 2200 hours while working Vice enforcement, myself along with Det. Sgt Leisher and members of the Baltimore City Liquor Board (Inspector Perez) were conducting a BD7 investigation of 132 S Carey street known as Opposite sidewalk saloon. The purpose of the investigation was to determine if the establishment was allowing patrons to enter the bar area and consume alcohol. It is known throughout the Baltimore City area that most liquor establishments operate the BD7 by only operating the package goods side of the business and not opening the tavern side to the public. On the aforementioned date and time, Investigator Perez of the Baltimore City Liquor Board posed as a patron and attempted to gain entry to the tavern side of the Opposite sidewalk saloon. Same was informed by an employee identified as Mr. Tedros Solomon who was working behind the counter at the time that the tavern area was closed.

At this time, Inspector Perez left the location and informed Det Sgt Leisher of the violation. We then entered the location and spoke to Mr. Solomon who was cooperative. All licenses and permits were in order and all necessary documentation was collected for report purposes. Mr. Solomon was advised to ensure patrons the opportunity to drink within the tavern area. A copy of this report was forwarded to Baltimore City Liquor board for further review.

All events happened in the City of Baltimore, State of Maryland.

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 R Lebrun** Sequence No: **G271** Assignment: **Vice** Signature:

23 Approving Supervisor Rank and Name : **Det Sgt C Leisher** Sequence No: **G307** Assignment: **Vice** Signature:

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

# Board of Liquor License Commissioners

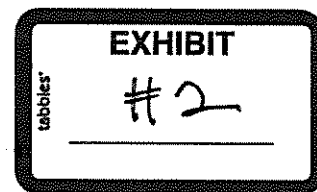
For Baltimore City  
1 North Charles Street, 15th Floor  
Baltimore, Maryland, 21201

## INVESTIGATION REPORT

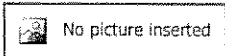
|  |                                   |                             |
|--|-----------------------------------|-----------------------------|
| Location Address:                      | 132 CAREY STREET SOUTH 21223      |                             |
| Licensee Information (Trade Name):     | OPPOSITE SIDEWALK SALOON          |                             |
| Corporation Name                       | WEHAZIT, INC.                     |                             |
| License Type:                          | Class "BD7" Beer, Wine and Liquor |                             |
| Owner Email:                           |                                   |                             |
| Contact:                               |                                   |                             |
| Bouncer/Security Name (if applicable): |                                   | D.O.B. <input type="text"/> |
| Incident Date/Time:                    | 9/6/2018                          | 12:02:02 PM                 |

### Report Facts:

On August 23rd, 2018 I Inspector Perez working in an undercover capacity along with members of the Baltimore Police Department Vice Unit (Sgt. Leisher & Det. Lebrun) to determine if staff would grant access to the tavern portion of the licensed premises to patrons. at approximately 10:15PM I walked into the establishment known as Opposite Sidewalk Saloon located at 132 S. Carey St. Baltimore, MD 21223. While inside the establishment I stood in line and waited for several minutes until other patrons conducted packaged goods purchases. Once I reached the counter I asked the store clerk "can I come in the back" meaning the rear portion of the establishment where the tavern is located. He asked me to wait a second. At this time the two clerks working behind the counter had a small conversation and he replied to me "I don't think so sir". At this time, I left the establishment and notified Sgt. Leisher I was denied entry to the tavern portion of the establishment. Moments later Sgt. Leisher & Det. Lebrun entered the establishment identified the clerk who denied entry as Tedros Solomon DOB 9/18/87. They were also made aware of the LBD7 license violation.



### Photos Taken:



|  |                                       |
|--|---------------------------------------|
| <i>Report Prepared By:</i>                               |                                       |
| Inspector(s)   | Submission Date                       |
| <input type="text" value="i:\0#w baltimore\andy.perez"/> | <input type="text" value="9/6/2018"/> |
| Supervisor Review:                                       | Approval Date                         |
| <input type="text" value="i:\0#w baltimore\andy.perez"/> | <input type="text" value="9/6/2018"/> |
| <i>Supervisor Use:</i>                                   |                                       |
| <i>Recommended Action(s):</i>                            |                                       |
| <input type="text"/>                                     |                                       |



# Liquor Board System

Version 1.0

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

## License Detail

### License Info

License Num: **LBD7 356**      Cert Num: **1030**      Fee: **\$1,320.00**      Status: **Renewed**  
 License Date: 5/1/2018      License Year: 2018  
 CR Number: 16588123  
 Payment Date: 04-27-18

2017 - 2018 TPP Paid   
 2018 Trader's License

[Click to Start License Renewal](#)

*9/18/18*  


---

 CORP ✓  
 T.L ✓  
 TRJ

## Add Adult Entertainment License

### Location

Corp Name: **WEHAZIT, INC.**  
 Trade Name: **OPPOSITE SIDEWALK SALOON**  
 Zone Code: 28  
 Phone: 410-727-9279

Block Num: 132      Street: **CAREY STREET SOUTH**  
 City: **BALTIMORE**      State: **MD**      Zip: **21223**

CR Number: 16588123

Portion of Business Used:  
 (USE) CONTINUE TO USE 1ST FLOOR FOR A TAVERN AND BASEMENT FOR STORAGE

Restriction:

### License Owners

| First Name | Last Name | Street                | City      | State | Zip   | Action                              | Change Owner                                |
|------------|-----------|-----------------------|-----------|-------|-------|-------------------------------------|---|
| AKLILU     | GEBRE     | 9457 GLEN RIDGE DRIVE | LAUREL    | MD    | 20723 | <input type="button" value="Edit"/> | <input type="button" value="Remove Owner"/> |
| YOSIEF T.  | TESFAZION | 703 GEORGE STREET     | BALTIMORE | MD    | 21201 | <input type="button" value="Edit"/> | <input type="button" value="Remove Owner"/> |

### Comments

|  |
|--|
|  |
|--|



| Date       | Comment   | Action |
|------------|---|--------|
| 04/21/2018 | Re: Public Hearing 4/19/2018 - Protest of Renewal - Voted to renew (3-0 vote) /kk   | Delete |
| 03/05/2018 | 3/1/2018 - Public Hearing RE: Violation of Rule 4.01(a) - ADMISION OF GUILT: Rule 4.01(a) Fined \$500 + \$125 admin fee, \$625 total fine, 30 days to pay (3-0 Vote)...../jr  | Delete |
| 03/01/2018 | PAID IN FULL \$625.00 for Violation Hearing on March 01, 2018; Invoice # 109597.... /mb   | Delete |
| 03/01/2018 | Mailed letter of recognition for underage drinking compliance check on 2/15/2018 /kk  | Delete |
| 03/01/2018 | PAID IN FULL \$675.00 for Violation Hearing on February 08, 2018; Invoice # 109586.... /sb  | Delete |
| 02/27/2018 | Given an invoice to Inspector John Howard Fosler for Violation Hearing fee dated on February 8, 2018; Fine Fee to be paid for \$675.00.... /mb.   | Delete |
| 02/09/2018 | 2/8/2018 - Public Hearing RE: Violation of Rule 4.20(c)(ii) Class BD7 Licensees, Violation of Rule 3.09(a), Violation of Rule 4.17(a) and Violation of Rule 4.18(a) - GUILTY - Rule 4.20(c)(ii) Fined #350, Rule 4.17(a) Fined \$100 and Rule 4.18(a) Fined \$100, \$550 + \$125 admin fee, \$675 total fine, 30 days to pay (3-0 Vote)...../jr | Delete |
| 11/16/2017 | PAID IN FULL for Violation Hearing dated October 19, 2017; Invoice # 109082.... /sb   | Delete |
| 11/09/2017 | Given an invoice to Chief Inspector M. Fosler for Violation Hearing fee dated on October 19, 2017; Fine Fee to be paid \$375.00.... /mb.  | Delete |
| 10/30/2017 | 10/19/17 - Public Hearing RE: - Violation Rule 4.20(c)(ii). DECISION: Rule 4.20(c)(ii) GUILTY; Fined \$250.00 + \$125.00 Admin Fee = \$375.00; 30 days to pay... /sb  | Delete |
| 10/06/2017 | 10/05/17 - Public Hearing RE: - Violation Rule 4.20(c)(ii). POSTPONED... /sb  | Delete |
| 12/29/2016 | Alcohol Awareness expires on 12/10/20 (Akiliu G. Gebre).... /sb   | Delete |
| 12/20/2016 | 12/15/16- Public Hearing re: Application to transfer ownership- APPROVED (3-0 vote)   | Delete |
| 07/28/2016 | Alcohol Awareness expires 07/23/20 (Yosief Tesfazion)   | Delete |
| 03/17/2015 | 3/17/2015 \$1,375.00 violation has been paid in full  | Delete |
| 03/02/2015 | 02/26/15 Public Hearing re Violation of Rule 5.03 GUILTY (\$500 Fine)& Violation of Rule 3.06 GUILTY (\$750 Fine) \$1250 Total Fine   | Delete |
| 03/13/2012 | 3/12 Transfer of ownership, BD7-BWL, Yosief Tesfazion, J. Dereck Heald, Opposite Sidewalk Saloon, Inc.  | Delete |

Print History (Print Card)

License num: LBD7 356                      Address: 132 CAREY STREET SOUTH  
 Trade Name: OPPOSITE SIDEWALK SALOON

Comment:

Add Comment

**Hold Info**

Powered by:



## WEHAZIT, INC.: D17531575

General Information

Filing History

Annual Report/Personal Property

### General Information

**Department ID Number:**

D17531575

**Business Name:**

WEHAZIT, INC.

**Principal Office:**

132 S. CAREY STREET  
BALTIMORE MD 21223

**Resident Agent:**

AKILILU GEBRE  
132 S. CAREY STREET  
BALTIMORE MD 21223

**Status:**

INCORPORATED

**Good Standing:**

THIS BUSINESS IS IN GOOD  
STANDING

» [Order Certificate of Status](#)

**Business Type:**

CORPORATION

**Business Code:**

03 ORDINARY BUSINESS - STOCK

**Date of Formation/ Registration:**

10/04/2016

**State of Formation:**

MD

**Stock Status:**

STOCK

**Close Status:**

NO

October 11, 2018

**Licensee(s):** Ashley Kim and Kyung Lee  
Arik, Inc., T/a Whispers  
1807-11 Baker Street 21217

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

**Violation of Alc. Bev. Art. §6-313(a)(2) Tampering with alcoholic beverage container – June 28, 2018 –** At approximately 12:13 pm, investigators Mangold and Southworth from the Maryland State Comptroller's Office conducted a routine inspection of the establishment. While conducting his inspection, Inspector Southworth observed that numerous bottles of alcoholic beverages that were displayed on the tavern side of the establishment were discolored. Further investigations revealed that the licensee had refilled five bottles of alcohol, with alcohol from other similar bottles. When asked why he refilled these five bottles of alcohol, the licensee admitted to the violation and stated that he was attempting to salvage the remains of the contents of similar damaged bottles. The five bottles of tampered alcohol included the following: (2) 750 ml bottles of Montebello Iced Tea Cocktail, (1) 750 ml bottle of Smirnoff Green Apple Vodka, (1) 200 ml bottle of Smirnoff Green Apple Vodka, and (1) 750 bottle of Ciroc Peach Vodka.

(a) **Service on Licensee(s):** Summons issued to the licensee(s) on 9/25/2018.

(b) **Witness Summoned:** Summons issued to Comptroller's Office: Agent Mangold and Inspector Southworth on 9/25/2018.

(c) **Violation History of Current Corporation:** Licensee appeared before the Board 4/19/2018 in reference to:

- Protest of Renewal
- (3-0 vote) - to renew the license

Licensee appeared before the Board 3/1/2018 in reference to:

- Violation of Rule 4.01(a) - Sales to Minors
- Guilty
- \$1,000 fine + \$125 admin fee
- \$1,125 total fine

Licensee appeared before the Board 2/15/2018 in reference to:

- Violation of Rule 4.20(c)(ii) - Open and Operating Tavern at all Times
- Guilty
- \$1,000 Fine + \$125 admin fee
- \$1,125 total fine

Licensee appeared before the Board 6/29/2017 in reference to:

- Violation of Rule 4.20(c)(ii) - Open and Operating Tavern at all Times
- Guilty
- \$350 Fine + \$125 admin fee
- \$475 total fine paid

Licensee appeared before the Board 4/20/2017 in reference to:

- Protest of Renewal
- (3-0 vote) - to renew the license

(d) **License Transfer Date:** The license transferred to the above named corporation on 11/9/2015.

**Board's Decision:**

State of Maryland

Board of Liquor License Commissioners

for Baltimore City  
1 N. Charles Street, Suite 1500  
Baltimore, Maryland, 21201-3724  
Phone: (410) 396-4377

**NOTICE**

To: ARIK, Inc.  
T/A Whispers  
1807-11 Baker Street

Date: September 24, 2018

**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 11<sup>th</sup> day of October 2018, 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 the Alcoholic Beverages Article, as amended, should not be suspended or revoked as required by this Board by Section 4-604 of said Article, following your conviction and/or violation of said law, to wit:

**Location of Incident:** T/A Whispers, 1807-11 Baker Street, Baltimore, MD ("the establishment").

**Violation of Alc. Bev. Art. §6-313(a)(2) Tampering with alcoholic beverage container – June 28, 2018** – At approximately 12:13 pm, investigators Mangold and Southworth from the Maryland State Comptroller's Office conducted a routine inspection of the establishment. While conducting his inspection, Inspector Southworth observed that numerous bottles of alcoholic beverages that were displayed on the tavern side of the establishment were discolored. Further investigations revealed that the licensee had refilled five bottles of alcohol, with alcohol from other similar bottles. When asked why he refilled these five bottles of alcohol, the licensee admitted to the violation and stated that he was attempting to salvage the remains of the contents of similar damaged bottles. The five bottles of tampered alcohol included the following: (2) 750 ml bottles of Montebello Iced Tea Cocktail, (1) 750 ml bottle of Smirnoff Green Apple Vodka, (1) 200 ml bottle of Smirnoff Green Apple Vodka, and (1) 750 bottle of Ciroc Peach Vodka.

**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 the Alcoholic Beverages Article of the Annotated Code of Maryland for reference purposes. If you have any questions or concerns regarding this matter please contact Deputy Executive Secretary, Thomas R. Akras at 410-396-4377.**

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

**Albert J. Matricciani, Jr., Chairman**

**BOARD OF LIQUOR LICENSE  
COMMISSIONERS  
FOR BALTIMORE CITY**

**STATE OF MARYLAND**

Comptroller of Maryland  
 Field Enforcement Bureau  
 LLG Treasury Building  
 80 Calvert Street, Room 310  
 Annapolis, Maryland 21401

**INCIDENT REPORT**

Case # 18-0254

Related Report # 18-005347

Tracking # 152001847675

|   |   |             |                   |
|---|---|-------------|-------------------|
| <u>Victim's Name</u> (Last, First, M) OR <u>Firm Name</u> (if Business) | <u>Sex</u>  | <u>Race</u> | <u>DOB</u>        |
| State Of Maryland   |   |             |                   |
| <u>Victim's Residence</u> (Address, City, State, Zip)                   | <div style="border: 2px solid black; padding: 5px; display: inline-block;"> <b>EXHIBIT</b><br/>                 #1             </div> |             | <u>Res. Phone</u> |
| <u>Victim's Employer</u>  |   |             | <u>Bus. Phone</u> |

|                          |                             |                             |  |
|--------------------------|-----------------------------|-----------------------------|--|
| <u>Incident</u>          | Tampering/Refilling Alcohol | <u>Location of Incident</u> | Whispers-1807-1811 Baker Street, Baltimore, MD 21217 |
| <u>Date Occ</u>          | <u>Time Occ</u>             | <u>Date Rptd</u>            | <u>Time Rptd</u>                                     |
| 06/28/2018               | 1213 Hours                  | 06/28/2018                  | 1213 Hours   |
| <u>Describe Location</u> | Bar/Package Goods Store     |                             |  |

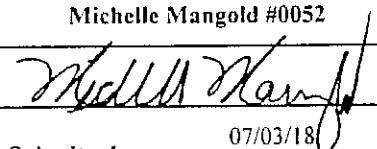
**Accused/ Suspects**

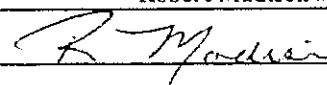
|                          |                 |                        |
|--------------------------|-----------------|------------------------|
| <u>Name:</u> Kim, Tack   | <u>Address:</u> | <u>City:</u> Baltimore |
| <u>State:</u> MD         | <u>Zip:</u>     | <u>Phone:</u>          |
| <u>DOB:</u> 12/19/1965   | <u>Sex:</u> M   | <u>Race:</u> Asian     |
| <u>Ht:</u> 5-7           | <u>Wt:</u> 120  | <u>Eyes:</u> Brown     |
| <u>Hair:</u> Gray        | <u>SSN:</u>     | <u>POB:</u>            |
| <u>Name:</u> Kim, Ashley | <u>Address:</u> | <u>City:</u>           |
| <u>State:</u>            | <u>Zip:</u>     | <u>Phone:</u>          |
| <u>DOB:</u>              | <u>Sex:</u>     | <u>Race:</u>           |
| <u>Ht:</u>               | <u>Wt:</u>      | <u>Eyes:</u>           |
| <u>Hair:</u>             | <u>SSN:</u>     | <u>POB:</u>            |
| <u>Name:</u> Lee, Kyung  | <u>Address:</u> | <u>City:</u>           |
| <u>State:</u>            | <u>Zip:</u>     | <u>Phone:</u>          |
| <u>DOB:</u>              | <u>Sex:</u>     | <u>Race:</u>           |
| <u>Ht:</u>               | <u>Wt:</u>      | <u>Eyes:</u>           |
| <u>Hair:</u>             | <u>SSN:</u>     | <u>POB:</u>            |

|                          |                             |                             |
|--------------------------|-----------------------------|-----------------------------|
| <u>Mode of Operation</u> | Tampering/Refilling alcohol | <u>Property Seized:</u> Yes |
| <u>Type of Seizure</u>   | Cigarettes                  | OTP                         |
| <u>Amount of Seizure</u> | Alcohol 5                   |                             |
| <u>Veh. Info</u>         | <u>Owner(s):</u>            | <u>Year</u>                 |
|                          | <u>Address:</u>             | <u>Make</u>                 |
|                          |                             | <u>Model</u>                |
|                          |                             | <u>Color</u>                |
|                          |                             | <u>State</u>                |
|                          |                             | <u>Tag</u>                  |

|  |              |   |                  |                   |
|--|--------------|---|------------------|-------------------|
| <u>Other:</u> Victims - Witness - Parent | <u>Code:</u> | Codes: V=Victim, W=Witness, P=Parent/Guardian         |                  |                   |
| <u>Name (Last, First, Middle)</u>        |              | <u>Home Address</u>                                   | <u>Hm. Phone</u> | <u>Bus. Phone</u> |
| a. Southworth, Alan                      | w            | 80 CALVERT Street, Annapolis, MD 21401                |                  | 410-260-7000      |
| b.                                       | w            |   |                  |                   |
| <u>Complainant (Last, First, Middle)</u> |              | <u>Home Address</u>                                   | <u>Hm. Phone</u> | <u>Bus. Phone</u> |
| Michelle Mangold #0052                   |              | Comptroller of Maryland 80 Calvert Street, Annapolis, |                  | 410-320-6678      |

**NARRATIVE** - (1) Continuation of above items include additional victims, witnesses and suspects as outlined above.  
 (2) Describe details of incident. (3) Describe evidence or property and indicate disposition. (Continue on Page 3)

|                              |  |
|------------------------------|--|
| <u>Retail Value:</u> \$76.44 | <u>Printed Name of Agent/Inspector:</u> Michelle Mangold #0052   |
| <u>Tax Loss:</u>             | <u>Signature of Agent/Inspector:</u>  |
|                              | <u>Date Submitted:</u> 07/03/18  |

|   |                      |               |
|---|----------------------|---------------|
| <u>Approving Supervisor</u>   | <u>Date Approved</u> | <u>Status</u> |
| <u>Printed Name:</u> Robert Madison #0042   | 7/19/18              | Closed        |
| <u>Signature:</u>  |                      |               |

**STATE OF MARYLAND**

Comptroller of Maryland  
 Field Enforcement Bureau  
 LLG Treasury Building  
 80 Calvert Street, Room 310  
 Annapolis, Maryland 21401

**INCIDENT REPORT**

Continuation   
 Supplemental

Case # 18-0254  
 Related Report # 18-005347  
 Tracking # 152001847675

**INCIDENT**  
 Tampering/Refilling Alcohol

Arrested / Violator(s)  
 Personal History:

|          | Suspect 1  | Suspect 2   | Suspect 3  |
|----------|------------|-------------|------------|
| Name:    | Kim, Taek  | Kim, Ashley | Lee, Kyung |
| Address: | [REDACTED] |             |            |
| City:    | Baltimore  |             |            |
| State:   | MD         |             |            |
| Zip:     | [REDACTED] |             |            |
| Phone:   | [REDACTED] |             |            |
| SSN:     |            |             |            |
| Sex:     | M          |             |            |
| Race:    | Asian      |             |            |
| POB:     |            |             |            |
| DOB:     | 12/1965    |             |            |
| Ht:      | 5-7        |             |            |
| Wt:      | 120        |             |            |
| Eyes:    | Brown      |             |            |
| Hair:    | Gray       |             |            |

Date of Arrest: 06/28/2018 Date of Incident: 06/28/2018

Location of Incident: Whispers-1807-1811 Baker Street, Baltimore, MD 21217

Charge(s): Expired Trader's License, Referred to Liquor Board

Disposition of Seizure: Held in Annapolis evidence room pending trial.

|                      |                   |            |                |                |             |                   |
|----------------------|-------------------|------------|----------------|----------------|-------------|-------------------|
| Seizure Information: | <u>Cigarettes</u> | <u>OTP</u> | <u>Alcohol</u> | <u>Vehicle</u> | <u>Cash</u> | <u>Motor Fuel</u> |
| Amount:              |                   |            | <u>5</u>       |                |             |                   |

Disposition of Defendants: Released on Criminal citation

Witnesses: Go to narrative for witness information.

Retail Value: \$76.44 Printed Name of Agent/Inspector: Michelle Mangold #0052

Tax Loss: \_\_\_\_\_ Signature of Agent/Inspector: 

Date Submitted: 07/03/2018

Approving Supervisor

Printed Name: Robert Madison #0042

Signature: 

Date Approved \_\_\_\_\_ Status \_\_\_\_\_

7/11/18 Closed

|   |   |
|---|---|
| <p align="center"><b>STATE OF MARYLAND</b></p> <p align="center">Comptroller of Maryland<br/>Field Enforcement Division<br/>LLG Treasury Building<br/>80 Calvert Street, Room 310<br/>Annapolis, Maryland 21401</p> | <p align="center"><b>INCIDENT REPORT</b></p> <p>Continuation <input checked="" type="checkbox"/></p> <p>Supplemental <input type="checkbox"/></p> |
| <p>Case # <u>18-0254</u></p> <p>Related Report # <u>Seq. # 18-005347</u></p> <p>Tracking # <u>152001847675</u></p>  | <p align="center"><b>INCIDENT</b></p> <p align="center">Tampering/Refill of Alcohol</p>   |

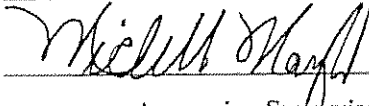

On June 28, 2017, at 12:13p.m., Supervisory Inspector Southworth and I conducted a routine tobacco and alcohol inspection at Whispers Tavern and package goods store, located at 1807-1811 Baker Street, Baltimore, Maryland 21217. I made contact with the business owner, Taek Kim, as I entered the business. I identified myself as an Agent for the Comptroller of Maryland, working for the Field Enforcement Division. I asked for the Trader's License, which is a document issued by the State of Maryland, which allows a business to sell products in their store, and receipts for the cigarettes and O.T.P. that were displayed for sale. I also asked for the Liquor License for the establishment. This establishment is a package goods store with an attached bar.

The owner, Taek Kim was able to provide me with an expired 2017 Trader's License. The Trader's License included cigarettes, special cigarettes and other tobacco products (O.T.P.), as items the business was authorized to sell. Other Tobacco products include cigars, cigarillos, chewing tobacco and loose tobacco products. She also provided the Liquor License (LBD7353) that allowed him to sell beer, wine and liquor. The Licensees on the liquor license are: Ashley Kim and Kyung Lee.

The cigarettes had Maryland Tax Stamps affixed to the individual packs. The O.T.P. receipts matched the inventory. I was given receipts from Costco and LG Distributors; both are licensed tobacco distributors in Maryland.

Supervisory Inspector Southworth assisted with the alcohol inspection. He advised the alcohol invoices matched the inventory in the business. The shipping labels for the alcohol boxes matched the business name and address for Whisper Tavern. The alcohol was purchased at local authorized wholesalers.

While Inspector Southworth was inspecting the bar side of the establishment, he noticed the alcohol being displayed was discolored. The bottle in question was a 750ml Montebello Iced Tea Cocktail, containing a clear liquid. Next to this bottle was a second 750 ml Montebello Iced Tea Cocktail bottle. The second bottle contained a dark liquid consistent with an unopened bottle of Montebello Iced Tea Cocktail displayed for sale in the package goods area of the business. Upon opening the suspected bottle I smelled a strong coconut smell consistent with the Malibu Coconut Rum on the shelf near the suspect bottle. Mr. Kim advised his bartender must have transferred the coconut rum to this bottle because it may have been damaged. I explained if a bottle of alcohol is delivered damaged he must report it to the vendor to have an undamaged bottle delivered and the damaged bottle returned. I further explained that at no time can a liquor establishment pour alcohol from one

|  |  |
|--|--|
| Printed Name of Agent/Inspector: <u>Agent Michelle Mangold #0052</u>   |  |
| Signature of Agent/Inspector: <u></u><br>Approving Supervisor | Date Submitted: <u>07-03-2018</u>        |
| Printed Name: <u>Robert Madison #0042</u>  | Date <u>7/19/18</u> Status <u>Closed</u> |
| Signature: <u></u>  |  |



|   |   |
|---|---|
| <p align="center"><b>STATE OF MARYLAND</b></p> <p align="center">Comptroller of Maryland<br/>Field Enforcement Division<br/>LLG Treasury Building<br/>80 Calvert Street, Room 310<br/>Annapolis, Maryland 21401</p> | <p align="center"><b>INCIDENT REPORT</b></p> <p>Continuation <input checked="" type="checkbox"/></p> <p>Supplemental <input type="checkbox"/></p> |
| <p>Case # <u>18-0254</u></p> <p>Related Report # <u>Seq. # 18-005347</u></p> <p>Tracking # <u>152001847675</u></p>  | <p align="center"><b>INCIDENT</b></p> <p align="center">Tampering/Refill of Alcohol</p>   |

bottle of alcohol into another bottle of alcohol. Inspector Southworth noticed several bottles appeared to have been refilled. There were "pour marks" on the outside of the bottles. Pour marks occur when alcohol is being transferred from one bottle to another. During refilling, the alcohol is spilled on the outside of the refilled bottle, and "runs" down the sides of the bottle. As the alcohol dries it leaves a "streaking effect" on the outside of the bottle. This is an indicator a bottle has been refilled. Inspector Southworth confronted Mr. Kim with his observations, Mr. Kim admitted to refilling a total of four other bottles, but stated he only used the same brand of alcohol that was in the original bottle. He advised sometimes the alcohol bottles arrive damaged and he transfers the contents to an undamaged bottle of alcohol. The four bottles of alcohol he admitted to refilling were: a 750ml bottle of Smirnoff Green Apple Vodka, a 200 ml bottle of Smirnoff Green Apple Vodka, a 750 ml bottle of Ciroc Peach Vodka and a second bottle of 750 ml Montebello Iced Tea Cocktail.

All 5 bottles of alcohol were seized from the shelf of the bar area.

I photographed the seized alcohol from the display shelves behind the bar. I also photographed the Maryland Driver's License for Mr. Kim.

Once the evidence was collected, I filled out a Notice of Seizure Receipt for Confiscation form. Mr. Kim signed the form and was given a copy. I transported the evidence to the Jessup temporary evidence storage for safekeeping. I filled out a property report form and submitted it with the evidence.

On June 29, 2018, Agent Michael Calvert #0046 transported the evidence to the Louis Goldstein Treasury Building 80 Calvert Street, Annapolis, Maryland, and placed it into evidence storage for safekeeping.

This case will be turned over to the Baltimore City Liquor Board for a hearing for tampering/refilling alcohol.

Mr. Kim was charged on a criminal citation with:

17-1804- Doing business without a valid Trader's License

There is nothing further to report.

|                                  |   |  |
|----------------------------------|---|--|
| Printed Name of Agent/Inspector: | <u>Agent Michelle Mangold #0052</u>   |  |
| Signature of Agent/Inspector:    |  | Date Submitted: <u>07-03-2018</u>            |
| Approving Supervisor             |   |  |
| Printed Name:                    | <u>Robert Madison #0042</u>   | <u>Date</u><br><u>Approved</u> <u>Status</u> |
| Signature:                       |  | <u>7/19/18</u> <u>OK</u>                     |

**FIELD ENFORCEMENT DIVISION  
REPORT OF VIOLATION**

CASE NUMBER: 18-0254 DEFENDANT #1: Kim, Ashley (Liquor License)  
(LAST NAME, FIRST NAME)

DATE OF VIOLATION: 6/28/2018

**UPDATED ROV** \_\_\_\_\_  
(DATE)

COUNTY/CITY: Baltimore City

Additional Defendants: #2 Lee, Kyung (Liquor License)  
(List all persons charged) #3 Kim, Taek (Trader's License)  
#4 \_\_\_\_\_

Business Name (Trade Name): Whispers

Location of Business (Address): 1807-1811 Baker Street, Baltimore, MD 21217

**VIOLATION TYPE**

- |   |                   |   |                             |
|---|-------------------|---|-----------------------------|
| <input checked="" type="checkbox"/> ALCOHOL | MD RESIDENT       | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| <input type="checkbox"/> TOBACCO            | BUSINESS          | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| <input type="checkbox"/> MOTOR FUEL         | PRIVATE RESIDENCE | <input type="checkbox"/> Yes            | <input type="checkbox"/> No |

CHARGE #1: Expired Trader's License (Citation)

CHARGE #2: Refilling liquor bottles (Liquor Board)

**ENFORCEMENT ACTION**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Physical Arrest     | <input checked="" type="checkbox"/> Liquor Board Report | <input type="checkbox"/> Confiscation Only (No Charges) |
| <input checked="" type="checkbox"/> Citation | <input type="checkbox"/> Criminal Summons               |   |

**CONFISCATIONS**

|  |                                      |
|--|--------------------------------------|
| • ALCOHOL:                                 | • TOTAL VALUE OF ALCOHOL:            |
| Beer _____ Kegs _____<br>(containers)      | Retail <u>\$76.44</u>                |
| Distilled Spirits <u>0.85</u><br>(gallons) | Tax Loss <u>N/A</u>                  |
| Wine _____<br>(gallons)                    | TOTAL CONTAINERS OF ALCOHOL <u>5</u> |

|   |                           |
|---|---------------------------|
| • TOBACCO:  | • TOTAL VALUE OF TOBACCO: |
| Cigarettes _____ OTP _____<br>(packs) (packages/sticks) | Retail _____              |

|                                     |                       |
|-------------------------------------|-----------------------|
| • VEHICLE: TAG # _____ STATE: _____ | Tax Loss _____        |
| YEAR _____                          |                       |
| MAKE _____                          | • AMOUNT OF CURRENCY: |
| MODEL _____                         | Bills _____           |
| VIN _____                           | Coins _____           |

Vehicle Tow Report Completed

Reporting Agent: M. Mangold #0052

FIL J ENFORCEMENT DIVISION  
ARREST DATA SHEET

CASE # 18-0254

**DEFENDANT(S) INFORMATION**

DATE 06/28/18 TIME 1115 Hours COUNTY Baltimore City

PLACE OF INCIDENT (BUSINESS) Whispers

ROAD NAME & CROSS STREET 1807-1811 Baker Street, Baltimore, MD 21217

DEFENDANT NAME Kim, Ashley(Liquor License), Lee, Kyung(LiquorLicense)

ALIAS(ES) \_\_\_\_\_

SOCIAL SECURITY # \_\_\_\_\_ DOB \_\_\_\_\_

ADDRESS [REDACTED] CITY Baltimore

STATE Maryland ZIP [REDACTED] PHONE# [REDACTED]

SEX Female RACE Asian HAIR COLOR \_\_\_\_\_

HEIGHT \_\_\_\_\_ WEIGHT \_\_\_\_\_ EYE COLOR \_\_\_\_\_

SCARS, MARKS, TATTOOS, ETC. \_\_\_\_\_

OCCUPATION Liquor License holders

DRIVER'S LICENSE # \_\_\_\_\_ STATE \_\_\_\_\_

U.S. CITIZEN  YES  NO PLACE OF BIRTH \_\_\_\_\_

CONSULAR NOTIFICATION  YES  NO COUNTRY \_\_\_\_\_

CO-DEFENDANT NAME Kim, Taek

ALIAS(ES) \_\_\_\_\_

SOCIAL SECURITY # \_\_\_\_\_ DOB 12/7/65

ADDRESS [REDACTED] CITY Baltimore

STATE Maryland ZIP [REDACTED] PHONE# [REDACTED]

SEX Male RACE Asian HAIR COLOR Grey

HEIGHT 5-07 WEIGHT 120 EYE COLOR Brown

SCARS, MARKS, TATTOOS, ETC. \_\_\_\_\_

OCCUPATION Owner

DRIVER'S LICENSE # \_\_\_\_\_ STATE \_\_\_\_\_

U.S. CITIZEN?  YES  NO PLACE OF BIRTH \_\_\_\_\_

CONSULAR NOTIFICATION  YES  NO COUNTRY \_\_\_\_\_

PRIMARY AGENT M. L. Mangold #0052 DATE COMPLETED 06/28/18

(ATTACH A SECOND SHEET IF MORE THAN ONE CO-DEFENDANT IS ARRESTED)

FIELD ENFORCEMENT DIVISION

ARREST DATE SHEET

CASE #

18-0254

ARREST INFORMATION

CHARGES Trader's license violation, Refilling Liquor bottles

QUANTITY OF CIGARETTES (PACKS) \_\_\_\_\_ OTP \_\_\_\_\_

RETAIL VALUE \$76.44 TAX LOSS N/A

PHOTOS OF SUSPECT(S) [X] YES [ ] NO PHOTOS OF THE VEHICLE/PROPERTY [X] YES [ ] NO

CURRENCY SEIZED? [ ] YES [ ] NO AMOUNT \_\_\_\_\_

ALLIED AGENCY \_\_\_\_\_

OFFICER NAME Michelle Mangold #0052 RANK Agent

ID NUMBER 52 BARRACK ASSIGNMENT \_\_\_\_\_

VEHICLE INFORMATION

TAG \_\_\_\_\_ STATE \_\_\_\_\_ CONFISCATED? [ ] YES [ ] NO

VEHICLE YEAR \_\_\_\_\_ MAKE \_\_\_\_\_ MODEL \_\_\_\_\_

VIN \_\_\_\_\_ COLOR \_\_\_\_\_

DRIVER \_\_\_\_\_ OWNER \_\_\_\_\_

ADDRESS OF OWNER \_\_\_\_\_

STATE \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE # \_\_\_\_\_

TOWING INFORMATION

LOCATION OF TOW \_\_\_\_\_ TOWED TO \_\_\_\_\_

TOW COMPANY \_\_\_\_\_ PHONE # \_\_\_\_\_

DATE OWNER NOTIFIED \_\_\_\_\_ DATE DRIVER NOTIFIED \_\_\_\_\_

AGENCY REQUESTING TOW \_\_\_\_\_

TOW BILL OBTAINED? [ ] YES [ ] NO AMOUNT OF TOW BILL \_\_\_\_\_

COMMENTS

Liquor inspection with Southworth. Owner Taek Kim cited for expired Trader's License, was on premisis.

Liquor license held by Ashley Kim and Kyung Lee. .85 gallons (5 bottles) seized. Retail \$76.44

Admitted refilling bottles, with same brand of alcohol.



UNIFORM CRIMINAL CITATION  
State of Maryland vs.

152001847675



Defendant's (Last) Name Kim First Taek Middle H

Current Address in Full  
[REDACTED]

City Baltimore County BA State MD Zip Code [REDACTED]

DOB 12-05-85 Height 5-7 Weight 120 Sex M Race Asian Ethnicity Gray Hair Brown Eyes Brown

Related Citations \_\_\_\_\_ Telephone No. \_\_\_\_\_ Day: \_\_\_\_\_ Night: \_\_\_\_\_

Arrest Number (if applicable) \_\_\_\_\_  Check if Fingerprinted

It is formally charged that the above named person on June 28, 2018 Year  
at 1115 AM at Whispers @ 1807-1811 Baker Street, (Location)  
Baltimore, MD 21217 City/County, Maryland did

did business in state of Maryland  
who current traders license.

EXHIBIT  
# 2

In violation of:  Md. Ann. Code  COMAR/Agency Code  Common Law of Md.  Ordinance  
 Public Local Law

Document/Article 17 Section 1804 CJIS Code 3-5100

Penalty: \$ 300.00 / 30 days

TO ANSWER THE ABOVE CHARGE LODGED AGAINST YOU:  
YOU ARE HEREBY SUMMONED AND COMMANDED TO APPEAR FOR TRIAL IN THE DISTRICT  
COURT OF MARYLAND FOR Baltimore City (CITY/COUNTY) LOCATED AT  
\_\_\_\_\_ MARYLAND.

ON \_\_\_\_\_ AT \_\_\_\_\_ M.  
 WHEN REQUIRED BY THE COURT. Date

YOUR FAILURE TO OBEY THIS CITATION MAY RESULT IN THE ISSUANCE  
OF A WARRANT FOR YOUR ARREST.

To request a foreign language interpreter or a reasonable accommodation under the  
Americans with Disabilities Act, please contact the court immediately.

I sign my name as a receipt of a copy of this citation and not as an admission of guilt. I hereby submit  
to the jurisdiction of the Court.

X Defendant's Signature [Signature]

I solemnly affirm under the penalties of perjury that the contents of the foregoing citation are true to the  
best of my knowledge, information, and belief.

Issuing Peace Officer's Signature [Signature] Date 06-28-18 Agency ATT Sub-Agency 001 ID No. 0052

DC-CR-045 (Rev. 7/2014) Print Date 1/2016 COURT COUNTY



Confiscation Date: 06-28-18 Defendant: (last, first) Kim, Taek Case No. 18-0254 County Baltimore City

Defendant: (last, first)

Address of Defendant: [REDACTED] Trade Name (if applicable): Whispers Business Address: 21217 1804-1811 Baker St., Balt. MD

**CONFISCATION TYPE**

Alcohol     Tobacco     Motor Fuel     Vehicle     Currency/Coin

**AMOUNT OF CONFISCATION**

Cigarettes: \_\_\_\_\_ Packs    Currency/Coin: \$ \_\_\_\_\_ Bills \$ \_\_\_\_\_ Coin

Alcohol (containers): 5 Distilled Spirits    Motor Fuel: \_\_\_\_\_ Gallons

\_\_\_\_\_ Wine

\_\_\_\_\_ Beer    Vehicle: \_\_\_\_\_  
(Year, Make, Model and Color)

Owner of Vehicle: \_\_\_\_\_

OTP: \_\_\_\_\_ Packages    Registration Tag/State: \_\_\_\_\_

**VIOLATION(S)**

| ARTICLE | SECTION |
|---------|---------|
|---------|---------|

AB 6 313 (A)(1)(2)

Charges: Refilling liquor bottles

| ARTICLE | SECTION |
|---------|---------|
|---------|---------|

Charges:

- The circumstances surrounding this confiscation are under a continuing investigation, which may result in additional criminal charges or administrative hearings.
- The property identified in this Notice was confiscated under the provisions of Tax-General Article, '13-835, Annotated Code of Maryland. If you desire a return of the property, you must request a hearing in writing to the Field Enforcement Division, P.O. Box 2397, Annapolis, MD 21404-2397 within 30 days of the seizure or Notice of Seizure.
- The property identified in this Notice was confiscated under the provisions of Article 2B, '1-201(f), Annotated Code of Maryland. If you desire a return of the property, you must file a claim against the Comptroller in the Circuit Court where the seizure occurred within 30 days of the date of the seizure or Notice of Seizure. A copy of the claim filed with the Circuit Court must be served upon the Comptroller of Maryland, Office of the Attorney General, 80 Calvert Street, Room 303, P.O. Box 466, Annapolis, MD 21404-0466.
- Failure to comply with the procedures noted herein will result in the automatic forfeiture of the property.

Defendant/Owner/Employee [Signature] DATE 06-28-18 Field Enforcement Rep. [Signature] DATE 06-28-18 Witness \_\_\_\_\_ DATE \_\_\_\_\_

|      |         |            |
|------|---------|------------|
| Room | Section | Row/Drawer |
|      |         |            |

**COMPTROLLER OF MARYLAND  
FIELD ENFORCEMENT DIVISION  
PROPERTY RECORD**

|                     |
|---------------------|
| Case No.<br>13-0254 |
|---------------------|

|                  |                   |   |   |
|------------------|-------------------|---|---|
| Date<br>06-28-18 | Time<br>1115 Hrs. | <input checked="" type="checkbox"/> Alcohol <input type="checkbox"/> Tobacco <input type="checkbox"/> OTP <input type="checkbox"/> Currency <input type="checkbox"/> Other: _____ | Name of Agent / Inspector<br>M. Marzoff / Agent |
|------------------|-------------------|---|---|

|  |   |
|--|---|
| Location of Storage<br><input checked="" type="checkbox"/> Annapolis <input type="checkbox"/> Jessup <input type="checkbox"/> Other: _____ | Field Count Conducted By<br>M. Marzoff #10052 |
|--|---|

|   |  |  |   |
|---|--|--|---|
| Owner of Property - Name (Last, First)<br>Kim, Taek | Owner Notified<br><input checked="" type="checkbox"/> Y <input type="checkbox"/> N | Date & Time Notified<br>06-28-18 1115 Hrs. | How Notified<br><input type="checkbox"/> In Person <input type="checkbox"/> Other |
|---|--|--|---|

|  |   |                               |
|--|---|-------------------------------|
| Business Name (T/A) or Additional Defendant(s)<br>Whisperers | Address<br>1307-1311 Baker St., Baltimore, MD 21217 | Telephone No.<br>410-662-2121 |
|--|---|-------------------------------|

| Qty | Alcohol Only |  | Item Description<br>(Brand Name, Type) | Alcohol Only                        |        | Evidence<br>Y/N | Partial Release |              |      |
|-----|--------------|--|--|-------------------------------------|--------|-----------------|-----------------|--------------|------|
|     | Alcohol Size |  |  | Open                                | Sealed |                 | To: Name        | By: Initials | Date |
| 1   | 750ml        |  | Smirnoff Green Apple Vodka             | <input checked="" type="checkbox"/> |        | Y               |                 |              |      |
| 1   | 750ml        |  | Ciroc Peach Vodka                      | <input checked="" type="checkbox"/> |        | Y               |                 |              |      |
| 1   | 200ml        |  | Smirnoff Green Apple Vodka             | <input checked="" type="checkbox"/> |        | Y               |                 |              |      |
| 2   | 750ml        |  | Montebello Izal Tequila Cocktail       | <input checked="" type="checkbox"/> |        | Y               |                 |              |      |
|     |              |  |  |                                     |        |                 |                 |              |      |

| ALCOHOL FROM ALL PAGES                |   | CIGARETTES FROM ALL PAGES             |  | OTP FROM ALL PAGES                    |  |
|---------------------------------------|---|---------------------------------------|--|---------------------------------------|--|
| Total Containers                      | 5 | Total Packs                           |  | Total Quantity                        |  |
| Property Room Count<br>(If Different) |   | Property Room Count<br>(If Different) |  | Property Room Count<br>(If Different) |  |

**CHAIN OF CUSTODY**

| (Location or Signature of Person from which evidence was obtained/secured) | DATE     | TIME      | (Location or Signature of Person from which evidence was obtained/secured) | DATE | TIME |
|--|----------|-----------|--|------|------|
| 1. Kim, Taek (Whisperers)  | 06-28-18 | 1115 Hrs. | 6.   |      |      |
| 2. Agent M. Marzoff #10052   | 06-28-18 | 1115 Hrs. | 7.   |      |      |
| 3. Jessup Property Storage   | 06-28-18 | 1130 Hrs. | 8.   |      |      |
| 4. Annapolis Storage   | 06-27-18 |           | 9.   |      |      |
| 5.   |          |           | 10.  |      |      |

|                                      |               |   |      |
|--------------------------------------|---------------|---|------|
| Remarks                              |               |   |      |
|                                      |               |   |      |
| Property Released To: (Full Release) |               | Recovered by Agent / Inspector - Signature<br>M. Marzoff #10052 |      |
| Address                              |               | Released to (Signature) Full Release                            |      |
| Page of 1                            | Date Released | ID Type   | ID # |
|                                      |               | Released by (Signature) Full Release                            |      |

COM/FED-207 Rev. 1/16

Distribution: White-Property Room Yellow-Sale Pink-Disposal Goldenrod-Case File

|  |                               |                                       |               |
|--|-------------------------------|---------------------------------------|---------------|
| <input type="checkbox"/> Alcohol <input type="checkbox"/> Tobacco <input type="checkbox"/> OTP <input type="checkbox"/> Other: _____ |                               | Counted and Verified in Property Room |               |
| FED Inventoried - Date: _____  | FED Inventoried - Date: _____ | Date _____                            | Initial _____ |
| FED Inventoried - Date: _____  | FED Inventoried - Date: _____ | Date _____                            | Initial _____ |

Inspection Type: Alcohol  Tobacco  Business License

Date: 6-28-18 Time In: 1100 Time Out: 1205 County: Baltimore City

Central Registration #: 30019025 Sales & Use Tax #: 110075955

Corporate Name: Arik Inc

T/A: Whisper3 Phone #: 410-662-2121

Address: 1807-1811 Baker Street, Baltimore, MD 21217  
(Street) (City) (State) (Zip)

**Business License Information**

Traders License #: 30180848 License Year: 2017

Endorsements: Cigarette  Special Cigarette  OTP  Restaurant  Chain  Other

**Alcohol Compliance**

Liquor License # LBD7353 Class/Type: B, W, L

Licensee(s) Ashley Kim Kyung Lee

Records: Yes  No  Current: Yes  No  Accessible: Yes  No  Orderly: Yes  No

Trade Practice Violation(s): Yes  No  Signs/Displays: Yes

Inventory: Yes  No  Storage Permit Needed: Yes  No

**Tobacco Compliance**

Cigarette Supplier: 40, Costco Delivery Date: 6-28-18 MD Stamps: Yes  No

Sales Below Cost: Yes  No  N/A  Invoices Available: Yes  No

OTP Supplier: LG Delivery Date: 6-23-18 OTP Tax Paid: Yes  No

OTP Supplier/Retailer Licensed: Yes  No  MSA List Compliant: Yes  No

**Violations**

Violation type: Refilling Liquor Action, if any: Pending  
(citation, warning, other)

Violation type: Trader's Lic. violation Action, if any: 152061847175  
(citation, warning, other)

Violation: Yes  No  Confiscation: Yes  No  Case #: 18-0254

Comments: Receipts in order - Admitted refilling bottles.

This inspection was performed on the date listed above in the presence of the business representative listed below.

[Signature]  
Signature of Representative

[Signature]  
Signature of Agent/Inspector

PAEK KIM  
Printed Name of Representative

M.L. Mansfield #0052  
Printed Name of Agent/Inspector

Signature of Supervisor \_\_\_\_\_ Date \_\_\_\_\_

Printed Name of Supervisor \_\_\_\_\_



0  
 Kim Taek H  
 Baltimore BA MD  
 12-105 57 120 M Asian

June 28 2018  
 1116 A. Whispers & 1807-1811 Baker Street,  
 Baltimore, MD 21217  
 Did business in State of Maryland  
 w/o current trader's license.

DL Class C Maryland  
 LCP  
 TAEK H KIM  
 5100  
 84718  
 259

**YOUR FAILURE TO OBEY THIS CITATION MAY RESULT IN THE ISSUANCE OF A WARRANT FOR YOUR ARREST**

To request a foreign language interpretation or a translator as a non-speaker under the Americans with Disabilities Act, please contact the court immediately.

*[Signature]* 06-28-18 AT# 001 0052  
 DC-CR-015-18-00121  
 Reg Date 1/22/16

18-0254

Defendant: Kim, Taek

Business: Whispers Tavern

Violation: Expired Trader's License, Tampering/Refilling alcohol



18-0254

Defendant: Kim, Taek

Business: Whispers Tavern

Violation: Expired Trader's License, Tampering/Refilling alcohol

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18-0254

Defendant: Kim, Taek

Business: Whispers Tavern

Violation: Expired Trader's License, Tampering/Refilling alcohol

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18-0254

Defendant: Kim, Taek

Business: Whispers Tavern

Violation: Expired Trader's License, Tampering/Refilling alcohol

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## Liquor Board System

Version 1.0

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

### License Detail

#### License Info

License Num: **LBD7 353**      Cert Num: **1017**      Fee: **\$1,320.00**      Status: **Renewed**  
 License Date: 5/1/2018      License Year: 2018  
 CR Number: 16075955  
 Payment Date: 04-26-18

2017 - 2018 TPP Paid  N  
 2018 Trader's License  Y     

9/19/18  


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 CORP ✓  
 T.L ✓  
 TPA

[Click to print out the license.](#)

#### Add Adult Entertainment License

#### Location

Corp Name: **ARIK,INC**  
 Trade Name: **WHISPERS**  
 Zone Code: 30  
 Phone: 410-662-2121

Block Num: 1807-11      Street: **BAKER STREET**  
 City: **BALTIMORE**      State: **MD**      Zip: 21217

CR Number: 16075955

Portion of Business Used:  
 FIRST & SECOND FLOORS FOR BUSINESS WITH LIVE ENTERTAINMENT; BASEMENT FOR STORAGE

Restriction:

#### License Owners

| First Name | Last Name | Street                   | City      | State | Zip   | Action                              | Change Owner                                |
|------------|-----------|--------------------------|-----------|-------|-------|-------------------------------------|---|
| ASHELY     | KIM       | 815 BERRYFIELD DRIVE     | Baltimore | MD    | 21236 | <input type="button" value="Edit"/> | <input type="button" value="Remove Owner"/> |
| KYUNG      | LEE       | 1235 W. BALTIMORE STREET | BALTIMORE | MD    | 21223 | <input type="button" value="Edit"/> | <input type="button" value="Remove Owner"/> |

#### Comments

|  |
|--|
|  |
|--|

| Date       | Comment  | Action |
|------------|--|--------|
| 04/21/2018 | Re: Public Hearing 4/19/2018 - Protest of Renewal - Voted to renew (3-0 vote) * Subject to MOU to be added to their license - 30 days to comply /kk  | Delete |
| 03/29/2018 | PAID IN FULL \$1,125.00 for Violation Hearing dated March 01, 2018; Invoice #110487.... /sb  | Delete |
| 03/15/2018 | PAID IN FULL \$1,125.00 for Violation Hearing dated February 15, 2018; Invoice #109905... /sb  | Delete |
| 03/06/2018 | Given an Invoice to Chief Inspector M. Foster for Violation Hearing fee dated on February 15, 2018; Fine Fee to be paid \$1,125.00.... /mb.  | Delete |
| 03/05/2018 | 3/1/2018 - Public Hearing RE: Violation of Rule 4.01(a) - ADMISSION OF GUILT: Rule 4.01(a) Fined \$1,000 + \$125 admin fee. \$1,125 total fine, 30 days to pay (3-0 Vote)...../jr                            | Delete |
| 02/15/2018 | 2/15/2018 Public Hearing RE: Violation of Rule 4.20(c)(ii) Class BD7 Licensees: Open and Operating at all Times - Guilty \$1,000 fine + \$125 admin fee = \$1,125 total fine - 30 days to pay (3-0 vote) /kk | Delete |
| 02/13/2018 | 1/25/2018 - Public Hearing RE: Violation of Rule 4.20(c)(iii) Class BD7 Licensees -POSTPONED.../jr   | Delete |
| 02/13/2018 | PAID \$475.00 in Full - Violation Hearing dated June 29, 2017; Invoice #108329.... /sb   | Delete |
| 02/13/2018 | 6/29/17 Violation of Rule 4.20(c)(ii) Class BD7 Licensees: Open and Operating Tavern at all Times. Guilty \$350 Fine + \$125 Admin Fee \$475 Total fine paid   | Delete |
| 02/13/2018 | 2/13/18 **Comment update preformed**   | Delete |
| 06/09/2017 | 6/1/17-Violation of Rule 4.20(c)(ii) Class BD7 Licensees: Open and Operating Tavern - POSTPONED  | Delete |
| 05/24/2017 | 4/20/17- 2017 Protest of Renewal - Board voted (3-0 vote) to renew license.  | Delete |
| 03/15/2017 | Alcohol Awareness Program Certificate was issued on September 17 2015 expires September 17 2019(A.C.E)   | Delete |
| 03/15/2017 | 08/27/15 Public Hearing re: Application to transfer ownership APPROVED   | Delete |
| 03/15/2017 | 06/11/15 Hearing Date, Paid \$1625.00 for fine. Invoice #99034   | Delete |
| 03/15/2017 | 6/11/2015 PUBLIC HEARING RE: Violation of Rule 4.01 (a) Sale to Minors GUILTY \$1625 FINE PAID   | Delete |
| 03/15/2017 | Hearing date 01/29/15, paid \$375.00 for fine. Invoice #95666.   | Delete |
| 03/15/2017 | 1/29/2015-Violation of Rule 4.01(a)-sale to Minor- Guilty \$250 fine +\$125 admin fee- Total fine paid \$625   | Delete |
| 03/15/2017 | 08/27/15 Public Hearing re: Application to transfer ownership APPROVED   | Delete |
| 01/30/2015 | 1/30/15 Application for Jin and Su Corporation has withdrawn transfer of ownership.  | Delete |
| 01/29/2015 | 1/22/15 PUBLIC HEARING RE: APPLICATION TO TRANSFER OWNERSHIP. POSTPONED  | Delete |
| 10/16/2013 | 10/10/13 Public Hearing re: Application to transfer ownership. Board APPROVED transfer. Hearing Fee \$100 PAID   | Delete |
| 08/21/2013 | 08/15/2013 Public Hearing re: Request for hardship extension under the provision of Article B Section 10-504(d). Board ORDERED show case   | Delete |
| 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  | Delete |
| 08/26/2009 | 08/25/09 \$100 COMPLIANCE CONFERENCE PAID IN FULL #69787   | Delete |
| 03/30/2009 | 03/26/09 Public Hearig re: Violation of rules 3.12,4.01(a) & 4.18. DECISION: POLICE OFFICER FAILED TO APPEAR.ALL CHARGES DISMISSED.  | Delete |

Print History (Print Card)

License num: LBD7 353  
Trade Name: WHISPERS

Address: 1807-11 BAKER STREET

Comment:

Add Comment

Hold Info

## ARIK, INC.: D16756389

General Information

Filing History

Annual Report/Personal Property

### General Information

**Department ID Number:**

D16756389

**Business Name:**

ARIK, INC.

**Principal Office:**

1807-09-11 BAKER STREET  
BALTIMORE MD 21217

**Resident Agent:**

ASHLEY KIM  
1807-09-11 BAKER STREET  
BALTIMORE MD 21217

**Status:**

INCORPORATED

**Good Standing:**

THIS BUSINESS IS IN GOOD  
STANDING

» [Order Certificate of Status](#)

**Business Type:**

CORPORATION

**Business Code:**

03 ORDINARY BUSINESS - STOCK

**Date of Formation/ Registration:**

09/11/2015

**State of Formation:**

MD

**Stock Status:**

STOCK

**Close Status:**

YES

October 11, 2018

**Licensee(s):** Sally Hutchins and Loretta Hutchins (PR)  
Fleet Street Company, T/a 1919  
1919 Fleet Street 21231

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

**Violation of Rule 3.09 (b) Rest Room Facilities and Health Regulations – August 24, 2018** – At approximately 10:00 PM Baltimore City Police Officers, the Department of Housing and Community Development, the Fire Department, and Health Department conducted a joint inspection of the establishment because of a complaint that it was operating without a health permit. Upon entering the establishment, Health Inspector Joy Tejada asked Ms. Sally Hutchins, the licensee, if she had a valid health permit. Ms. Hutchins informed Ms. Tejada that she had not had a valid health permit since 2011. At that time, Ms. Hutchins was informed that she could not operate her establishment without a valid health permit. The establishment was then closed by the Health Department until Ms. Hutchins could obtain a valid health permit.

(a) **Service on Licensee(s):** Summons issued to the licensee(s) on 9/25/2018.

(b) **Witness Summoned:** Summons issued to Inspector Andy Perez on 9/25/2018. Summons issued to Baltimore City Police Dept.: Sgt. Leisher and Det. Greenhill on 9/25/2018. Summons issued to the Baltimore City Health Dept: Inspector Tejada on 9/25/2018.

(c) **Violation History of Current Corporation:** The current corporation has no history of violations.

(d) **License Transfer Date:** The license transferred to the above named corporation on 1/16/1985.

**Board's Decision:**



State of Maryland

Board of Liquor License Commissioners

for Baltimore City  
1 N. Charles Street, Suite 1500  
Baltimore, Maryland, 21201-3724  
Phone: (410) 396-4377

**NOTICE**

To: Fleet Street Company  
T/A 1919  
1919 Fleet Street

Date: September 24, 2018

**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 11th day of October 2018, 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 the Alcoholic Beverages Article, as amended, should not be suspended or revoked as required by this Board by Section 4-604 of said Article, following your conviction and/or violation of said law, to wit:

**Location of Incident:** T/A 1919, 1919 Fleet Street, Baltimore, MD ("the establishment").

**Violation of Rule 3.09 (b) Rest Room Facilities and Health Regulations – August 24, 2018** – At approximately 10:00 PM Baltimore City Police Officers, the Department of Housing and Community Development, the Fire Department, and Health Department conducted a joint inspection of the establishment because of a complaint that it was operating without a health permit. Upon entering the establishment, Health Inspector Joy Tejada asked Ms. Sally Hutchins, the licensee, if she had a valid health permit. Ms. Hutchins informed Ms. Tejada that she had not had a valid health permit since 2011. At that time, Ms. Hutchins was informed that she could not operate her establishment without a valid health permit. The establishment was then closed by the Health Department until Ms. Hutchins could obtain a valid health permit.

**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 the Alcoholic Beverages Article of the Annotated Code of Maryland for reference purposes. If you have any questions or concerns regarding this matter please contact Deputy Executive Secretary, Thomas R. Akras at 410-396-4377.**

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

**Albert Matricciani, Jr., Chairman**

BOARD OF LIQUOR LICENSE  
COMMISSIONERS  
FOR BALTIMORE CITY

POLICE DEPARTMENT  
BALTIMORE, MARYLAND

|  |                                    |                                     |
|--|------------------------------------|-------------------------------------|
| 1 Crime / Incident<br>Liquor Board Violation | Attempted <input type="checkbox"/> | 2 Complaint Number<br>2-1808-010502 |
|--|------------------------------------|-------------------------------------|

Person   
  Property   
  Vehicle   
  Miscellaneous  
 Domestic Related   
 Gang Related   
 Juvenile Related   
 Hate Crime

|   |             |
|---|-------------|
| 3 Location of Offense / Incident (Exact Street Address):<br>1919 Fleet Street - 21231 | Page 1 of 2 |
|---|-------------|

|   |   |
|---|---|
| 4 Date / Time Occurred<br>24 Aug 18 - 2200hrs | 5 Date / Time Reported<br>27 Aug 18 - 0100hrs |
|---|---|

|  |   |   |               |                         |  |   |
|--|---|---|---------------|-------------------------|--|---|
| 6 Unit<br>4841   | 7 Post of Occurrence<br>213   | 8 Reporting Area  | 9 Street Code | 10 CAD Number<br>0069   | 11 Location Given by Dispatcher<br>On-View                   | 12 Companion Report No  |
| 13 Case Status<br><input type="checkbox"/> Open <input checked="" type="checkbox"/> Closed | 14 Case Disposition<br><input checked="" type="checkbox"/> Cleared <input type="checkbox"/> Not Cleared | 15 Follow-up<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | 16 Crime Code | 17 Crime Classification | 18 Describe Location of Offense or Type of Premise<br>Tavern | 19 Reported by Crime Watcher<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

|  |  |   |             |                 |     |
|--|--|---|-------------|-----------------|-----|
| 20 Complainant / Victim<br>Name (Last, First, MI), or Firm Name if Business<br>Greenhill, L.C. III | Residence / Address (Include City, County, State, Zip)<br>601 E. Fayette St. - 21202 | Sex<br>M                                      | Race<br>B   | Age<br>48       | DOB |
| Where Employed or School Attending (Include City Located)<br>BPD - ACS-Vice                        | Occupation<br>Detective  | Hours of Employment/Residence Phone<br>Varied | Other Phone | Sobriety<br>sbr |     |

|                                  |                    |  |                                    |  |
|----------------------------------|--------------------|--|------------------------------------|--|
| 21 Injuries and Location on Body | Victim's Condition | Victim Hospitalized / Facility<br><input type="checkbox"/> Yes <input type="checkbox"/> No | 22 Victim / Assailant Relationship | 23 Current / Former Cohabitant<br><input type="checkbox"/> Yes <input type="checkbox"/> No |
|----------------------------------|--------------------|--|------------------------------------|--|

|   |          |           |           |     |  |                 |                       |
|---|----------|-----------|-----------|-----|--|-----------------|-----------------------|
| 24 Reporting Person<br>Name (Last, First, MI)<br>SA #20 | Sex<br>M | Race<br>B | Age<br>48 | DOB | Address (Include City, County, State, Zip)<br>SA #20 | Residence Phone | Other Phone<br>SA #20 |
|---|----------|-----------|-----------|-----|--|-----------------|-----------------------|

|  |                        |  |                 |             |
|--|------------------------|--|-----------------|-------------|
| 25 Witness Parent/Guardian<br><input type="checkbox"/> | Name (Last, First, MI) | Address (Include City, County, State, Zip) | Residence Phone | Other Phone |
|--|------------------------|--|-----------------|-------------|

|                                      |  |   |      |             |       |               |        |
|--------------------------------------|--|---|------|-------------|-------|---------------|--------|
| 26 Suspect<br>Name (Last, First, MI) | Address (Include City, County, State, Zip) | Sex   | Race | Age         | DOB   | Height        | Weight |
| Complexion                           | Hair Color, Length/Style                   | Hat   | Eyes | Facial Hair | Teeth | Shirt/Coat    |        |
| Parts                                | 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 Escape |
|---|-------------------|-----------------------|---------------------|------------------------|

|                             |                                |                           |                     |
|-----------------------------|--------------------------------|---------------------------|---------------------|
| 32 Weapon / Means of Attack | 33 Method Used to Commit Crime | 34 Type of Property Taken | 35 Total Loss Value |
|-----------------------------|--------------------------------|---------------------------|---------------------|

|  |            |  |  |  |  |  |  |  |  |
|--|------------|--|--|--|--|--|--|--|--|
| 36 Vehicle Information<br><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   | Mileage  |  |  |
| Vehicle Identification Number (VIN)  |            | Ignition Locked  | Keys In Ignition   | Doors Locked   | Windows Closed   | Radio in Car   | Battery in Car   | Spare Tire in Car  | Trunk Locked   |
|  |            | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <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 Stopping / Tampering | 41 Repo Check<br><input type="checkbox"/> Yes <input type="checkbox"/> No | 42 Tow List Check<br><input type="checkbox"/> Yes <input type="checkbox"/> No | 43 Owner Notified<br><input type="checkbox"/> Yes <input type="checkbox"/> No |
|-----------------|--------------------|-------------------------------------|---|---|---|

|   |                   |          |                              |
|---|-------------------|----------|------------------------------|
| 44 Tow Information<br>Location Towed From | Location Towed To | Towed by | Tow Truck Operator Signature |
|---|-------------------|----------|------------------------------|

|  |             |      |      |                              |      |      |
|--|-------------|------|------|------------------------------|------|------|
| 45 Detective Notified<br>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 |
|------------------------------|-------------|------|-----------------------------|------|

|   |   |  |
|---|---|--|
| 49 Communications Supervisor Notified<br><input type="checkbox"/> Yes <input type="checkbox"/> No | 50 Citywide Broadcast<br><input type="checkbox"/> Yes <input type="checkbox"/> No | 51 Victim Assistance/Incident Information Explain Form(s) Provided<br><input type="checkbox"/> Yes <input type="checkbox"/> No |
|---|---|--|

|  |
|--|
| 52 Copies Forwarded To<br>Liquor Board |
|--|

Conf'd Sections Narrative: (1) Continuation of any preceding form. (2) Property Listing: to include property taken and surrendered/retained 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: Fleet Street Company  
T/A: 1919  
1919 Fleet Street  
Baltimore, Md 21231



Liquor License# LBD7 193

Licensee: Lonetta H. Hutchins, Sally Hutchins

Continued

|  |  |           |
|--|--|-----------|
| 53 Reporting Officer Name (PRINT CLEARLY)<br>Det. L.C. Greenhill III | Sequence No. Assignment<br>F820 ACS - Vice | Signature |
|--|--|-----------|

|  |  |           |
|--|--|-----------|
| 54 Approving Supervisor Rank and Name<br>Det. Sgt. Chris Leisher | Sequence No. Assignment<br>G307 ACS - Vice | Signature |
|--|--|-----------|

|                        |                   |      |             |                |
|------------------------|-------------------|------|-------------|----------------|
| 55 RMS Date Entered By | Sequence No. Date | Time | 56 Reviewer | 57 Referred To |
|------------------------|-------------------|------|-------------|----------------|

REPORT SHOULD BE TYPED OR LEGIBLY PRINTED IN BLACK INK

SUPPLEMENT REPORT  
Form 04/007  
1160-25-23

POLICE DEPARTMENT  
BALTIMORE, MARYLAND

|   |                             |  |                                     |
|---|-----------------------------|--|-------------------------------------|
| 1 Crime / Incident<br>Liquor Board Violation  |                             | Attempt <input type="checkbox"/>   | 2 Complaint Number<br>2-1808-010502 |
| 3 Location of Offense / Incident (Street Address, Zip)<br>1919 Fleet Street - 21231                               |                             |  | Page 2 of 2                         |
| 4 Date / Time of This Report<br>27 Aug 18 - 0100hrs   |                             | 5 Arrest / Custody Number  |                                     |
| 6 Unit<br>4841  | 7 Post of Occurrence<br>213 | 8 Reporting Area   | 9 Street Code                       |
| 10 CAD Number<br>0069   |                             | 11 Original Report Date / Time<br>24 Aug 18 - 2200hrs  |                                     |
| 12 Offense / Incident Changed From  |                             |  |                                     |
| 13 Case Status<br><input type="checkbox"/> Open <input checked="" type="checkbox"/> Closed                        |                             | 14 Multiple Clearance<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |                                     |
| 15 Case Disposition (Explain)<br><input checked="" type="checkbox"/> Cleared <input type="checkbox"/> Not Cleared |                             | 16 Follow-up<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No          |                                     |
| 17 Crime Code   |                             | 18 Crime Classification  |                                     |

Continuation  Follow Up

Person  Property  Miscellaneous  Vehicle  Missing Person  Custody

|                         |  |  |  |  |  |                            |  |
|-------------------------|--|--|--|--|--|----------------------------|--|
| 19 Complainant / Victim |  | Name (Last, First, MI) or Firm Name if Business<br>Greenhill, L.C. III |  | Residence / Address (Include City, County, State, Zip)<br>601 E. Fayette St. - 21202 |  | Sex Race Age DOB<br>M B 48 |  |
|-------------------------|--|--|--|--|--|----------------------------|--|

20 Copies Forwarded To  
Liquor Board

21 Cont'd Section 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, time. (5) Recommend case status when applicable. (6) If Multiple Clearance, include all affected complaint/case numbers.

On 24 August 2018 at 2200hrs(10:00pm), Detective Greenhill along with members of ACS-Vice as well as Investigators from Baltimore Housing, Inspectors from the Health Department and the Baltimore City Liquor Control Board all of which make up the Social Club Task Force(SCTF), conducted a licensed liquor establishment check at "1919" located at 1919 Fleet Street. The purpose of the check was information received from the Health Department concerning the fact that the establishment known as (1919) had been operating without a Health Permit since 2011 according to the internal records of the Health Department. Licensee, Miss Sally Hutchins was present but upstairs in her residence with one of her bartenders working the bar downstairs. Inspector Joy Tejada of the Health Department advised the task force that the establishment has been operating without a health permit since 2011. The Liquor Board had also received minor 311 complaints about the establishment as well. The bartender on duty was asked to have the licensee, Miss Hutchins come downstairs so that Inspector Tejada could speak to her concerning the health permit. At that time licensee, Miss Hutchins came downstairs and Inspector Tejada informed her that the establishment has not had a valid health permit since 2011 and had to be closed until a valid health permit was obtained for the establishment. The establishment was closed for the weekend and left in the control of Miss Hutchins.

Report to be forwarded to the Liquor Board for further administrated review

Continued

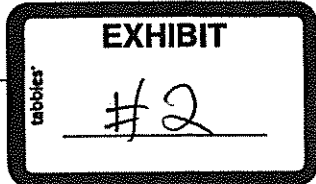
21 I affirm and declare that the statements above are true to the best of my knowledge: Reporting Person's Signature \_\_\_\_\_ Date \_\_\_\_\_

|  |                                 |            |               |
|--|---------------------------------|------------|---------------|
| 22 Reporting Officer Name (PRINT CLEARLY)<br>Det. L.C. Greenhill III | Sequence No./Assignment<br>F820 | ACS - Vice | Signature<br> |
|--|---------------------------------|------------|---------------|

|  |                                 |            |               |
|--|---------------------------------|------------|---------------|
| 23 Approving Supervisor Rank and Name<br>Det. Sgt. Chris Leisher | Sequence No./Assignment<br>G307 | ACS - Vice | Signature<br> |
|--|---------------------------------|------------|---------------|

|                        |              |      |      |             |                |
|------------------------|--------------|------|------|-------------|----------------|
| 24 RMS Data Entered By | Sequence No. | Date | Time | 25 Reviewer | 26 Referred To |
|------------------------|--------------|------|------|-------------|----------------|

REPORT SHOULD BE TYPED OR LEGIBLY PRINTED IN BLACK INK



Board of Liquor License Commissioners

For Baltimore City
1 North Charles Street, 15th Floor
Baltimore, Maryland, 21201

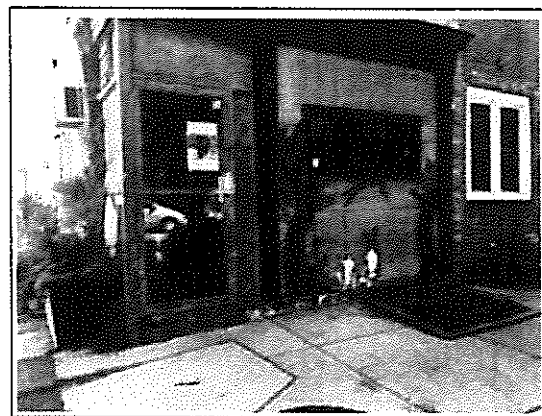
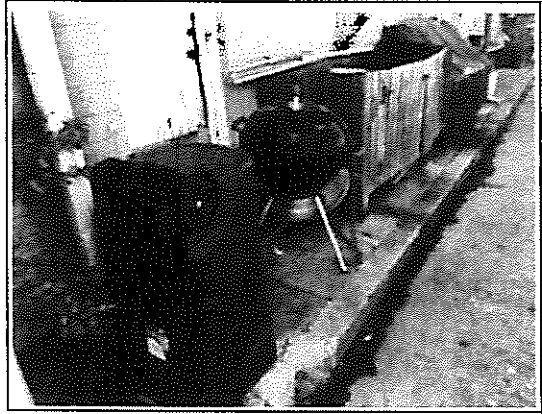
INVESTIGATION REPORT

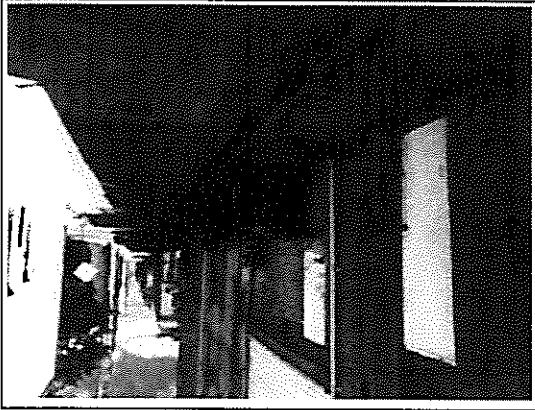
Form with fields: Location Address (1919 FLEET STREET 21231), Licensee Information (Trade Name) (1919), Corporation Name (FLEET STREET COMPANY), License Type (Class "BD7" Beer, Wine and Liquor), Owner Email, Contact, Bouncer/Security Name (if applicable), Incident Date/Time (9/26/2018, 10:55:39 AM)

Report Facts:

On or about 8/23/18 The BLLC received 311 complaint # 18-00609512 for alleged dogs inside the establishment, rodent infestation, trash all around the property and overflowing cans with no lids. Inspector Perez responded to the call for service on 8/23/18 at approximately 3:30PM. Upon arrival I found the establishment closed. However, I was able to walk around the property and did not witness any trash in alley way or in front of the property. A joint follow up inspection was conducted on 8/24/18 that included members of The Baltimore City Health Department, Baltimore Police Vice Unit, Baltimore Housing and staff from BLLC (Inspector Perez & Inspector Crowder). The team arrived at approximately 10:00PM at that time Health Inspector Tejada from informed us the establishment has not had a valid health permit since 2011. The establishment was ordered to closed by order of the health department until a valid health permit was obtained. Miss Hutchins who was present at the establishment was informed of the violation.

Photos Taken:





**Report Prepared By:**

Inspector(s)

Submission Date

i:\0#.w\|baltimore\andy.perez

9/26/2018

Supervisor Review:

Approval Date

i:\0#.w\|baltimore\andy.perez

9/26/2018

**Supervisor Use:**

**Recommended Action(s):**

|  |
|--|
|  |
|--|



## Liquor Board System

Version 1.0

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

### License Detail

#### License Info

License Num: **LBD7 193**      Cert Num: **0722**      Fee: **\$1,320.00**      Status: **Renewed**  
 License Date: 5/1/2018      License Year: 2018  
 CR Number: 03162235  
 Payment Date: 04-26-18

2017 - 2018 TPP Paid  N  
 2018 Trader's License  Y     

9/22/18  


---

 CORP ✓  
 T.L ✓  
 TRJ

[View or Print License Details](#)

#### Add Adult Entertainment License

#### Location

Corp Name: **FLEET STREET COMPANY**  
 Trade Name: **1919**  
 Zone Code: 13  
 Phone: 443-844-5203

Block Num: 1919      Street: FLEET STREET      Zip: 21231  
 City: BALTIMORE      State: MD

CR Number: 03162235

Portion of Business Used:  
 FIRST FLOOR FOR BUSINESS & BASEMENT FOR STORAGE; LICENSEE MAY PROVIDE LIVE ENTERTAINMENT.

Restriction:  
 JOSEPH A. RADTKE BARRED FROM PREMISES IN ANY CAPACITY.

#### License Owners

| First Name | Last Name          | Street              | City      | State | Zip   | Action | Change Owner |
|------------|--------------------|---------------------|-----------|-------|-------|--------|--------------|
| SALLY      | HUTCHINS           | 2513 EASTERN AVENUE | BALTIMORE | MD    | 21224 | Edit   | Remove Owner |
| LORETTA H. | HUTCHINS, PR & IND | 1844 DENTON AVENUE  | BALTIMORE | MD    | 21231 | Edit   | Remove Owner |

#### Comments

|  |
|--|
|  |
|--|

| Date       | Comment   | Action |
|------------|---|--------|
| 04/01/2016 | *****RELEASED STATE TAX HOLD.../sb*****               | Delete |
| 03/23/2016 | Alcohol Awareness expires 03/18/2020 (Sally Hutchins) | Delete |
| 01/19/2016 | State of MD Tax Hold, letter sent... /sb              | Delete |
| 02/15/2005 | 02/15/05 ADM.FEE PAID #51223                          | Delete |

Print History (Print Card)

License num: LBD7 193  
Trade Name: 1919

Address: 1919 FLEET STREET

Comment:

Add Comment

**Hold Info**

Powered by:





## THE FLEET STREET COMPANY: D01831445

**General Information**

Filing History

Annual Report/Personal Property

### General Information

**Department ID Number:**

D01831445

**Business Name:**

THE FLEET STREET COMPANY

**Principal Office:**

1919 FLEET STREET  
BALTIMORE MD 21231

**Resident Agent:**

SALLY HUTCHINS  
1919 FLEET STREET  
BALTIMORE MD 21231

**Status:**

REVIVED

**Good Standing:**

THIS BUSINESS IS IN GOOD  
STANDING

▶ **Order Certificate of Status**

**Business Type:**

CORPORATION

**Business Code:**

03-ORDINARY-BUSINESS-STOCK

**Date of Formation/ Registration:**

12/03/1984

**State of Formation:**

MD

**Stock Status:**

STOCK

**Close Status:**

NO

October 11, 2018

**Licensee(s):** Jahanne Dumas Bagwell and Praneet Sahni  
Manjit, Inc. Three, T/a The Liquor Store-Socialize  
6130 Belair Road 21206

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

**Violation of Rule 4.01(a) Sales to Minors – July 18, 2018** – At approximately 10:25 PM, the Baltimore City Police Department and the BLLC conducted random, joint investigations of establishments to determine if licensees would sell alcoholic beverages to minors. The joint task force responded to the establishment and sent Baltimore City Police Cadet Jaquan Dickerson, who is under the age of 21, into the establishment to attempt to purchase an alcoholic beverage(s). At that time, Dickerson entered the establishment and purchased a 375 ml bottle of New Amsterdam Peach Vodka. Utilizing a departmental \$20 bill, Dickerson purchased the alcoholic beverage(s) from bartender/store clerk Mr. Upendra Kumar. Dickerson then communicated to the task force that he had purchased an alcoholic beverage(s). Members of the task force entered the establishment and notified Mr. Kumar that an alcoholic beverage(s) had just been purchased by a minor and it would be reported to the BLLC. The task force then recovered the marked currency and returned both the alcoholic beverage(s) to the bartender and/or any change that was provided to Dickerson.

(a) **Service on Licensee(s):** Summons issued to the licensee(s) on 9/25/2018.

(b) **Witness Summoned:** Summons issued to Inspector John Chrissomallis on 9/25/2018. Summons issued to Baltimore City Police Dept.: Sgt. Leisher, Det. Greenhill, and Cadet Dickerson on 9/25/2018.

(c) **Violation History of Current Corporation:** The current corporation has no history of violations.

(d) **License Transfer Date:** The license transferred to the above named corporation on 4/17/2017.

**Board's Decision:**

---

State of Maryland

Board of Liquor License Commissioners

for Baltimore City  
1 N. Charles Street, Suite 1500  
Baltimore, Maryland, 21201-3724  
Phone: (410) 396-4377

**NOTICE**

To: Manjit, Inc. Three  
T/A The Liquor Store-Socialize  
6130 Belair Road

Date: September 24, 2018

**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 11th day of October 2018, 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 the Alcoholic Beverages Article, as amended, should not be suspended or revoked as required by this Board by Section 4-604 of said Article, following your conviction and/or violation of said law, to wit:

**Location of Incident:** T/A The Liquor Store-Socialize, 6130 Belair Road, Baltimore, MD ("the establishment").

**Violation of Rule 4.01(a) Sales to Minors – July 18, 2018** – At approximately 10:25 PM, the Baltimore City Police Department and the BLLC conducted random, joint investigations of establishments to determine if licensees would sell alcoholic beverages to minors. The joint task force responded to the establishment and sent Baltimore City Police Cadet Jaquan Dickerson, who is under the age of 21, into the establishment to attempt to purchase an alcoholic beverage(s). At that time, Dickerson entered the establishment and purchased a 375 ml bottle of New Amsterdam Peach Vodka. Utilizing a departmental \$20 bill, Dickerson purchased the alcoholic beverage(s) from bartender/store clerk Mr. Upendra Kumar. Dickerson then communicated to the task force that he had purchased an alcoholic beverage(s). Members of the task force entered the establishment and notified Mr. Kumar that an alcoholic beverage(s) had just been purchased by a minor and it would be reported to the BLLC. The task force then recovered the marked currency and returned both the alcoholic beverage(s) to the bartender and/or any change that was provided to Dickerson.

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 the Alcoholic Beverages Article of the Annotated Code of Maryland for reference purposes. If you have any questions or concerns regarding this matter please contact Deputy Executive Secretary, Thomas R. Akras at 410-396-4377.

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

**Albert Matricciani, Jr., Chairman**

BOARD OF LIQUOR LICENSE  
COMMISSIONERS  
FOR BALTIMORE CITY

INCIDENT REPORT  
Form 04/008  
1160-28-04

POLICE DEPARTMENT  
BALTIMORE, MARYLAND

Person  Property  Vehicle  Miscellaneous  
 Domestic Related  Gang Related  Juvenile Related  Hate Crime

|   |                                  |  |
|---|----------------------------------|--|
| 1 Crime / Incident<br>Liquor Board Violation  | Attempt <input type="checkbox"/> | 2 Complaint Number<br>4-1807-08608             |
| 3 Location of Offense / Incident (Exact Street Address)<br>6130 Belair Road - 21206 |                                  | Page 1 of 2                                    |
| 4 Date / Time Occurred<br>18 July 2018 - 2225hrs                                    |                                  | 5 Date / Time Reported<br>24 July 18 - 0330hrs |

|  |   |   |               |                         |   |   |
|--|---|---|---------------|-------------------------|---|---|
| 6 Unit<br>4841   | 7 Post of Occurrence<br>425   | 8 Reporting Area  | 9 Street Code | 10 CAD Number<br>242    | 11 Location Given by Dispatcher<br>On-View                                | 12 Companion Report No  |
| 13 Case Status<br><input type="checkbox"/> Open <input checked="" type="checkbox"/> Closed | 14 Case Disposition<br><input checked="" type="checkbox"/> Cleared <input type="checkbox"/> Not Cleared | 15 Follow-up<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | 16 Crime Code | 17 Crime Classification | 18 Describe Location of Offense or Type of Premise<br>Liquor Store/Tavern | 19 Reported by Crime Watcher<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

|  |  |  |
|--|--|--|
| 20 Complainant / Victim<br>Name (Last, First, MI), or Firm Name of Business<br>Greenhill, L.C. III | Residence / Address (Include City, County, State, Zip)<br>601 E. Fayette St. - 21202 | Sex: M Race: Age: 37 DOB: 48   |
| Where Employed or School Attending (Include City Located)<br>BPD - IIS-Vice                        | Occupation<br>Detective  | Hours of Employment/Residence Phone<br>Varied  |
| 21 Injuries and Location on Body   | Victim's Condition   | Victim Hospitalized / Facility<br><input type="checkbox"/> Yes <input type="checkbox"/> No |
| 22 Victim / Assailant Relationship   |  | 23 Current / Former Cohabitant<br><input type="checkbox"/> Yes <input type="checkbox"/> No |

|   |                      |  |                 |                       |
|---|----------------------|--|-----------------|-----------------------|
| 24 Reporting Person<br>Name (Last, First, MI)<br>SA #20 | Sex: Race: Age: DOB: | Address (Include City, County, State, Zip)<br>SA #20 | Residence Phone | Other Phone<br>SA #20 |
|---|----------------------|--|-----------------|-----------------------|

|   |                        |  |                 |             |
|---|------------------------|--|-----------------|-------------|
| 25 Witness Parent/Guardian<br><input type="checkbox"/> <input type="checkbox"/> | Name (Last, First, MI) | Address (Include City, County, State, Zip) | Residence Phone | Other Phone |
|---|------------------------|--|-----------------|-------------|

|                                      |  |   |         |               |
|--------------------------------------|--|---|---------|---------------|
| 26 Suspect<br>Name (Last, First, MI) | Address (Include City, County, State, Zip) | Sex: Race: Age: DOB:  | Height: | Weight:       |
| Complexion                           | Hair Color/Length/Style                    | Hat   | Eyes    | Facial Hair   |
| Teeth                                | Shirt/Coat                                 | 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 Escape |
| 32 Weapon / Means of Attack                         | 33 Method Used to Commit Crime | 34 Type of Property Taken | 35 Total Loss Value |                        |

|  |            |  |   |   |   |   |   |
|--|------------|--|---|---|---|---|---|
| 36 Vehicle Information<br><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  | 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 |
| 37 Registered Owner Name (Last, First, MI)   |            | Sex: Race: Age: DOB:   | Address (Include City, County, State, Zip)                                |   |   |   |   |

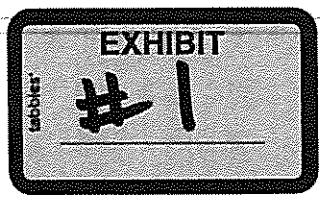
|   |                    |                                      |   |   |   |
|---|--------------------|--------------------------------------|---|---|---|
| 38 Recovered by                           | 39 Method of Theft | 40 Evidence of Stripping / Tampering | 41 Repo Check<br><input type="checkbox"/> Yes <input type="checkbox"/> No | 42 Tow List Check<br><input type="checkbox"/> Yes <input type="checkbox"/> No | 43 Owner Notified<br><input type="checkbox"/> Yes <input type="checkbox"/> No |
| 44 Tow Information<br>Location Towed From | Location Towed To  | Towed by                             | Tow Truck Operator Signature  |   |   |

|   |   |                    |  |                              |      |      |
|---|---|--------------------|--|------------------------------|------|------|
| 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  |                              |      |      |
| 49 Communications Supervisor Notified<br><input type="checkbox"/> Yes <input type="checkbox"/> No | 50 Citywide Broadcast<br><input type="checkbox"/> Yes <input type="checkbox"/> No | Time               | 51 Victim Assistance/Incident Information Explain Form(s) Provided<br><input type="checkbox"/> Yes <input type="checkbox"/> No |                              |      |      |

|  |
|--|
| 52 Copies Forwarded To<br>Liquor Board |
|--|

Cont'd Sections: (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: Manjit, Inc. Three  
T/A: The Liquor Store-Socialize  
6130 Belair Road  
Baltimore, Md 21206



Liquor License#: LBD7 316

Licensee: Praneet Sahni, Jashanne Dumas Bagwell

Continued

|  |                                   |          |           |
|--|-----------------------------------|----------|-----------|
| 53 Reporting Officer Name (PRINT CLEARLY)<br>Det. L.C. Greenhill III | Sequence No. / Assignment<br>F820 | IIS-Vice | Signature |
| 54 Approving Supervisor Rank and Name<br>Det. Sgt. Chris Leisher     | Sequence No. / Assignment<br>G307 | IIS-Vice | Signature |

|                        |                     |      |             |                |
|------------------------|---------------------|------|-------------|----------------|
| 55 RMS Data Entered By | Sequence No. / Date | Time | 56 Reviewer | 57 Referred To |
|------------------------|---------------------|------|-------------|----------------|

REPORT SHOULD BE TYPED OR LEGIBLY PRINTED IN BLACK INK

POLICE DEPARTMENT  
BALTIMORE, MARYLAND

Continuation

Follow Up

Person  Property  Miscellaneous  Vehicle  Missing Person  Custody

|   |  |  |                           |  |  |
|---|--|--|---------------------------|--|--|
| 1 Crime / Incident<br>Liquor Board Violation  |  | Attempt <input type="checkbox"/>   |                           | 2 Complaint Number<br>4-1807-08608   |  |
| 3 Location of Offense / Incident (Street Address, Zip)<br>6130 Belair Road - 21206                      |  |  |                           | Page 2 of 2  |  |
| 4 Date / Time of This Report<br>24 July 18 - 0330hrs  |  |  | 5 Arrest / Custody Number |  |  |
| 6 Unit<br>4841  |  | 7 Post of Occurrence<br>425  |                           | 8 Reporting Area   |  |
| 9 Street Code   |  | 10 CAD Number<br>242   |                           | 11 Original Report Date / Time<br>18 July 18 - 2225hrs                                       |  |
| 12 Offense / Incident Changed From  |  | 13 Case Status<br><input type="checkbox"/> Open <input checked="" type="checkbox"/> Closed         |                           | 14 Multiple Clearance<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  |
| 15 Case Disposition<br><input checked="" type="checkbox"/> Cleared <input type="checkbox"/> Not Cleared |  | 16 Follow-up<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                |                           | 17 Crime Code  |  |
| 18 Crime Classification   |  | 19 Complainant / Victim<br>Name (Last, First, MI), or Firm Name if Business<br>Greenhill, L.C. III |                           | Residence / Address (Include City, County, State, Zip)<br>601 E. Fayette St. - 21202         |  |
|   |  | Sex: M   |                           | Race: B  |  |
|   |  | Age: 48  |                           | DOB:   |  |

20 Copies Forwarded To  
Liquor Board

Cont'd Sections Narrative: (1) Continuation of any preceding forms. (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 complaint/case numbers.

On 18 July 18 at 2225hrs(10:25pm), Detective Greenhill along with members of IIS-Vice, as well as Liquor Agent John Chrissomallis from the Baltimore City Liquor Control Board, conducted an Underage Sales to Minor Investigation at "The Liquor Store-Socialize" located at 6130 Belair Road. Also working was Baltimore City Police Cadet Jaquan Kai Dickerson with a date of birth of December 1998, making him 19 years of age at the time of this investigation. Cadet Dickerson whom was working in an undercover capacity, entered "The Liquor Store-Socialize" located at 6130 Belair Road and purchased a 375ml of "Peach Amsterdam" vodka from server, Mister Upendra Kumar GC, M/O/24, 10/19/93. Cadet Dickerson paid using a departmental \$20 and recieved change. Cadet Dickerson exited the establishment and advised members of Vice as well as the Liquor Board that he had just purchased alcohol from the establishment known as "The Liquor Store-Socialize".

Minutes later Sgt Leisher along with Liquor Agent John Chrissomallis entered the location identified as "The Liquor Store-Socialize". Sgt Leisher recovered the departmental \$20 and the change recieved was returned back to the establishment. Liquor Agent Chrissomallis photographed the "Peach Amsterdam" vodka and returned it back to the establishment as well. Detective Greenhill along with Liquor Agent Chrissomallis explained to Mister Upendra Kumar GC that he would not be criminally charged, but an administrated report would be written up for the establishment. The establishment was left in the control of Mister Upendra Kumar GC.

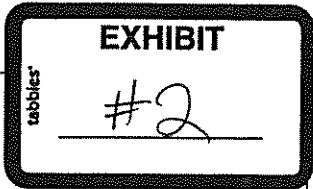
Report to be forwarded to the Liquor Board for further administrated review.

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)<br>Det. L.C. Greenhill III                    |  | Sequence No./Assignment<br>F820 |  | IIS-Vice                     |  | Signature      |  |
| 23 Approving Supervisor Rank and Name<br>Det. Sgt. Chris Leisher                        |  | Sequence No./Assignment<br>G307 |  | IIS-Vice                     |  | Signature      |  |
| 24 RMS Data Entered By  |  | Sequence No. Date               |  | Time                         |  | 25 Reviewer    |  |
|   |  |                                 |  |                              |  | 26 Referred To |  |

REPORT SHOULD BE TYPED OR LEGIBLY PRINTED IN BLACK INK

Back



### Board of Liquor License Commissioners

For Baltimore City  
1 North Charles Street, 15th Floor  
Baltimore, Maryland, 21201

## INVESTIGATION REPORT

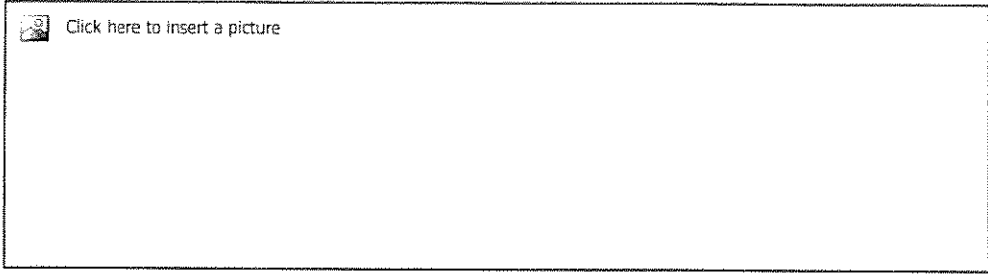
|  |  |
|--|--|
| Location Address:                      | 6130 BELAIR ROAD 21206                           |
| Licensee Information (Trade Name):     | THE LIQUOR STORE-SOCIALIZE                       |
| Corporation Name                       | MANJIT, INC. THREE                               |
| License Type:                          | Class "BD7" Beer, Wine and Liquor                |
| Owner Email:                           |  |
| Contact:                               |  |
| Bouncer/Security Name (if applicable): | <input type="text"/> D.O.B. <input type="text"/> |
| Incident Date/Time:                    | 9/24/2018 2:57:02 PM                             |

**Report Facts:**

On or about July 18, 2018 at approx. 22:25 hrs. I Agent Chrissomallis while on duty and working with the Underage Task Force with members of the BPD Vice Unit Det. Greenhill Det. Sgt. Leisher and Police Cadet Dickerson who was working in an undercover capacity and who was under the age of 21 during this investigation where conducting underage operations throughout the city. We arrived at 6130 Belair Road in the City of Baltimore and the State of Maryland at the establishment known as The Liquor Store -Socialize. Once at the establishment Cadet Dickerson entered and went to the counter and purchased a bottle of Peach Amsterdam from the server later identified as one Upendra Kumar GC with a DOB of 10/1993. Cadet Dickerson used the departmental 20.00 bill to pay for the product and received change. Once outside he notified us that he made the buy and we entered the location and identified the server. We explained that a police cadet under 21 had just purchased alcohol and we recovered the departmental 20. We returned the change to the server with the product. We explained the violation and the process and left the location without any further incident.

Disregard dates and times in the heading of this report. Actual dates and times are in the body of this report.

Photos Taken:



Attach Additional Photos

*Report Prepared By:*

Inspector(s)

Submission Date

i:\0#.w\|baltimore\john.chrissomalliss

9/24/2018

Submit



## Liquor Board System

Version 1.0

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

### License Detail

#### License Info

License Num: **LBD7 316**      Cert Num: **0958**      Fee: **\$1,320.00**      Status: **Renewed**  
 License Date: 5/1/2018      License Year: 2018  
 CR Number: 16710210  
 Payment Date: 04-26-18

2017 - 2018 TPP Paid   
 2018 Trader's License

9/23/18  


---

 CORP ✓  
 T.L ✓  
 TRD

#### Add Adult Entertainment License

#### Location

Corp Name: **MANJIT, INC. THREE**  
 Trade Name: **THE LIQUOR STORE-SOCIALIZE**  
 Zone Code: 43  
 Phone: 410-426-3230

Block Num: 6130      Street: BELAIR ROAD  
 City: BALTIMORE      State: MD      Zip: 21206

CR Number: 16710210

Portion of Business Used:  
 USE PREMISES AS A SPORTS BAR AND LIQUOR STORE

Restriction:

#### License Owners

| First Name    | Last Name | Street              | City      | State | Zip   | Action | Change Owner |
|---------------|-----------|---------------------|-----------|-------|-------|--------|--------------|
| JAHANNE DUMAS | BAGWELL   | 1306 STONEWOOD ROAD | Baltimore | MD    | 21239 | Edit   | Remove Owner |
| PRANEET       | SAHNI     | 7510 GILLEY TERRACE | Baltimore | MD    | 21237 | Edit   | Remove Owner |

#### Comments

|  |
|--|
|  |
|--|



| Date       | Comment  | Action |
|------------|--|--------|
| 02/16/2017 | ***** RELEASED STATE TAX HOLD***** /kr   | Delete |
| 02/10/2017 | 2/9/17- Public Hearing re: New Class b restaurant license, request for live entertainment & off premise catering - ***** Comissioner Moore recused - APPROVED (2-0 vote)                               | Delete |
| 10/26/2016 | MARYLAND SALES TAX HOLD ON 10/26/2016....K/R   | Delete |
| 06/17/2016 | ***** RELEASED STATE TAX HOLD***** /sb   | Delete |
| 03/18/2016 | PAID IN FULL NSF OF \$80.00 BY MONEY ORDER 17-349983463, Invoice # 100799.... /sb  | Delete |
| 02/17/2016 | Sent Invoice out to licensee alternate (home) address about fees need to be paid for NSF; \$50.00 + 30.00 = \$80.00.... /sb  | Delete |
| 02/01/2016 | ***** 01/19/16 - State of MD Tax Hold, letter sent... /sb  | Delete |
| 01/15/2016 | Casey Jenkins came in and PAID \$1,350.00 for the NSF 2015-2016 Renewal License Fee; Invoice # 100224.... /sb  | Delete |
| 01/12/2016 | Casey Jenkins called and says that he will bring the cashier's check in here on Friday, January 15, 2016.  | Delete |
| 01/04/2016 | Casey Jenkins called me and he just received letter; he says he will bring cashier's check or money order to office by January 11, 2016. The phone number he can be reached on is 443-226-3634.... /sb | Delete |
| 12/29/2015 | Letter is being sent to Licensee Home Address about NSF in the amounts of \$1,320 + \$30.00 (Renewal Fee); \$50.00 + \$30.00 (Application Fee).... /sb   | Delete |
| 07/20/2015 | Letter is being hand-delivered by an inspector about NSF in the amount of \$1,320.00 + \$30.00 (Renewal Fee)... /sb  | Delete |
| 07/20/2015 | Letter is being hand-delivered by an inspector about NSF in the amount of \$50.00 + \$30.00 (application Fee)... /sb   | Delete |
| 02/03/2015 | State of MD Tax Hold, letter sent to merchant on January 23, 2015.   | Delete |
| 02/27/2013 | Application for transfer with live entertainment and outdoor table service filed 1/14/13   | Delete |
| 02/15/2013 | 2/7/2013 Public Hearing re: Application to transfer with request for live entertainment and outdoor table service. APPROVED.   | Delete |
| 01/17/2013 | Application filed January 2013 transfer of ownership from secured creditor with request for live entertainment and outdoor table service   | Delete |

Print History (Print Card)

License num: LBD7 316                      Address: 6130 BELAIR ROAD  
 Trade Name: THE LIQUOR STORE-SOCIALIZE

Comment:

Add Comment

**Hold Info**

Powered by:



➔ Maryland Business Express

🏠 Home

👤 Log In / Create Account

**MANJIT INC. THREE: D17421769**

**General Information**

Filing History

Annual Report/Personal Property

**General Information**

**Department ID Number:**

D17421769

**Business Name:**

MANJIT INC. THREE

**Principal Office:**

7510 GILLEY TERRAE  
ROSEDALE MD 21237

**Resident Agent:**

MANJIT SINGH  
13305 A FALLS ROAD  
HUNT VALLEY MD 21030

**Status:**

INCORPORATED

**Good Standing:**

THIS BUSINESS IS IN GOOD  
STANDING

» [Order Certificate of Status](#)

**Business Type:**

CORPORATION

**Business Code:**

03-ORDINARY-BUSINESS-STOCK

**Date of Formation/ Registration:**

08/08/2016

**State of Formation:**

MD

**Stock Status:**

STOCK

**Close Status:**

YES

October 11, 2018

**Licensee(s):** Prince Anand  
K. Anand, Inc., T/a Hubcap Inn  
6001 Belair Road 21206

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

**Violation of Rule 4.01(a) Sales to Minors – July 18, 2018** – At approximately 10:40 PM, the Baltimore City Police Department and the BLLC conducted random, joint investigations of establishments to determine if licensees would sell alcoholic beverages to minors. The joint task force responded to the establishment and sent Baltimore City Police Cadet Jaquan Dickerson, who is under the age of 21, into the establishment to attempt to purchase an alcoholic beverage(s). At that time, Dickerson entered the establishment and purchased a 375 ml bottle of New Amsterdam Peach Vodka. Utilizing a departmental \$20 bill, Dickerson purchased the alcoholic beverage(s) from bartender/store clerk Mr. Mukesh Acharya. Dickerson then communicated to the task force that he had purchased an alcoholic beverage(s). Members of the task force entered the establishment and notified Mr. Acharya that an alcoholic beverage(s) had just been purchased by a minor and it would be reported to the BLLC. The task force then recovered the marked currency and returned both the alcoholic beverage(s) to the bartender and/or any change that was provided to Dickerson.

(a) **Service on Licensee(s):** Summons issued to the licensee(s) on 9/25/2018.

(b) **Witness Summoned:** Summons issued to Inspector John Chrissomallis on 9/25/2018. Summons issued to Baltimore City Police Dept.: Sgt. Leisher, Det. Greenhill, and Cadet Dickerson on 9/25/2018.

(c) **Violation History of Current Corporation:** Licensee appeared before the Board on 2/21/2012 in reference to:

- Violation of Rule 4.01(a) - Sale to Minors
- Guilty
- \$500 fine + \$125 admin fee
- \$625 total fine

Licensee appeared before the Board on 9/27/2012 in reference to:

- Violation of Rule 4.18 - Charter not in Good Standing
- Submitted the required documents
- Paid \$125 in lieu of hearing

---

(d) **License Transfer Date:** The license transferred to the above named corporation in 2011.

**Board's Decision:**

State of Maryland

Board of Liquor License Commissioners

for Baltimore City  
1 N. Charles Street, Suite 1500  
Baltimore, Maryland, 21201-3724  
Phone: (410) 396-4377

**NOTICE**

To: K Anamd, Inc.  
T/A Hubcap Inn  
6001 Belair Road

Date: September 24, 2018

**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 11th day of October 2018, 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 the Alcoholic Beverages Article, as amended, should not be suspended or revoked as required by this Board by Section 4-604 of said Article, following your conviction and/or violation of said law, to wit:

**Location of Incident:** T/A Hubcap Inn, 6001 Belair Road, Baltimore, MD ("the establishment").

**Violation of Rule 4.01(a) Sales to Minors – July 18, 2018** – At approximately 10:40 PM, the Baltimore City Police Department and the BLLC conducted random, joint investigations of establishments to determine if licensees would sell alcoholic beverages to minors. The joint task force responded to the establishment and sent Baltimore City Police Cadet Jaquan Dickerson, who is under the age of 21, into the establishment to attempt to purchase an alcoholic beverage(s). At that time, Dickerson entered the establishment and purchased a 375 ml bottle of New Amsterdam Peach Vodka. Utilizing a departmental \$20 bill, Dickerson purchased the alcoholic beverage(s) from bartender/store clerk Mr. Mukesh Acharya. Dickerson then communicated to the task force that he had purchased an alcoholic beverage(s). Members of the task force entered the establishment and notified Mr. Acharya that an alcoholic beverage(s) had just been purchased by a minor and it would be reported to the BLLC. The task force then recovered the marked currency and returned both the alcoholic beverage(s) to the bartender and/or any change that was provided to Dickerson.

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 the Alcoholic Beverages Article of the Annotated Code of Maryland for reference purposes. If you have any questions or concerns regarding this matter please contact Deputy Executive Secretary, Thomas R. Akras at 410-396-4377.

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

**Albert Matricciani, Jr., Chairman**

BOARD OF LIQUOR LICENSE  
COMMISSIONERS  
FOR BALTIMORE CITY

POLICE DEPARTMENT  
BALTIMORE, MARYLAND

Person  Property  Vehicle  Miscellaneous  
 Domestic Related  Gang Related  Juvenile Related  Hate Crime

|  |                                  |                                    |
|--|----------------------------------|------------------------------------|
| 1 Crime / Incident<br>Liquor Board Violation | Attempt <input type="checkbox"/> | 2 Complaint Number<br>4-1807-08991 |
|--|----------------------------------|------------------------------------|

|   |             |
|---|-------------|
| 3 Location of Offense / Incident (Exact Street Address)<br>6001 Belair Road - 21206 | Page 1 of 2 |
|---|-------------|

|  |  |
|--|--|
| 4 Date / Time Occurred<br>18 July 18 - 2240hrs | 5 Date / Time Reported<br>24 July 18 - 2355hrs |
|--|--|

|                |                             |                  |               |                       |  |                        |
|----------------|-----------------------------|------------------|---------------|-----------------------|--|------------------------|
| 6 Unit<br>4841 | 7 Post of Occurrence<br>425 | 8 Reporting Area | 9 Street Code | 10 CAD Number<br>3076 | 11 Location Given by Dispatcher<br>On-View | 12 Companion Report No |
|----------------|-----------------------------|------------------|---------------|-----------------------|--|------------------------|

|  |   |   |               |                         |  |   |
|--|---|---|---------------|-------------------------|--|---|
| 13 Case Status<br><input type="checkbox"/> Open <input checked="" type="checkbox"/> Closed | 14 Case Disposition<br><input checked="" type="checkbox"/> Cleared <input type="checkbox"/> Not Cleared | 15 Follow-up<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | 16 Crime Code | 17 Crime Classification | 18 Describe Location of Offense or Type of Premise<br>Tavern | 19 Reported by Crime Watcher<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|--|---|---|---------------|-------------------------|--|---|

|   |   |          |           |           |     |
|---|---|----------|-----------|-----------|-----|
| 20 Complainant / Victim<br>Name (Last, First, MI) or Firm Name if Business<br>Greenhill, L.C. III | Residence / Address (Include City, County, State, Zip)<br>601 E. Fayette St - 21202 | Sex<br>M | Race<br>B | Age<br>48 | DOB |
|---|---|----------|-----------|-----------|-----|

|   |                         |   |             |                 |
|---|-------------------------|---|-------------|-----------------|
| Where Employed or School Attending (Include City Located)<br>BPD - IIS-Vice | Occupation<br>Detective | Hours of Employment/Residence Phone<br>Varied | Other Phone | Sobriety<br>sbr |
|---|-------------------------|---|-------------|-----------------|

|                                  |                    |  |                                    |  |
|----------------------------------|--------------------|--|------------------------------------|--|
| 21 Injuries and Location on Body | Victim's Condition | Victim Hospitalized / Facility<br><input type="checkbox"/> Yes <input type="checkbox"/> No | 22 Victim / Assailant Relationship | 23 Current / Former Cohabitant<br><input type="checkbox"/> Yes <input type="checkbox"/> No |
|----------------------------------|--------------------|--|------------------------------------|--|

|   |          |           |     |     |  |                 |                       |
|---|----------|-----------|-----|-----|--|-----------------|-----------------------|
| 24 Reporting Person<br>Name (Last, First, MI)<br>SA #20 | Sex<br>M | Race<br>B | Age | DOB | Address (Include City, County, State, Zip)<br>SA #20 | Residence Phone | Other Phone<br>SA #20 |
|---|----------|-----------|-----|-----|--|-----------------|-----------------------|

|  |                        |  |                 |             |
|--|------------------------|--|-----------------|-------------|
| 25 Witness Parent/Guardian<br><input type="checkbox"/> | Name (Last, First, MI) | Address (Include City, County, State, Zip) | Residence Phone | Other Phone |
|--|------------------------|--|-----------------|-------------|

|                                      |  |     |      |     |     |        |        |
|--------------------------------------|--|-----|------|-----|-----|--------|--------|
| 26 Suspect<br>Name (Last, First, MI) | Address (Include City, County, State, Zip) | Sex | Race | Age | DOB | Height | Weight |
|--------------------------------------|--|-----|------|-----|-----|--------|--------|

|            |                         |     |      |             |       |            |
|------------|-------------------------|-----|------|-------------|-------|------------|
| Complexion | Hair Color/Length/Style | Hat | Eyes | Facial Hair | Teeth | Shirt/Coat |
|------------|-------------------------|-----|------|-------------|-------|------------|

|        |       |   |               |
|--------|-------|---|---------------|
| Prints | 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 Escape |
|---|-------------------|-----------------------|---------------------|------------------------|

|                             |                                |                           |                     |
|-----------------------------|--------------------------------|---------------------------|---------------------|
| 32 Weapon / Means of Attack | 33 Method Used to Commit Crime | 34 Type of Property Taken | 35 Total Loss Value |
|-----------------------------|--------------------------------|---------------------------|---------------------|

|  |            |       |            |                   |       |                  |         |
|--|------------|-------|------------|-------------------|-------|------------------|---------|
| 36 Vehicle Information<br><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 | 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<br><input type="checkbox"/> Yes <input type="checkbox"/> No | 42 Tow List Check<br><input type="checkbox"/> Yes <input type="checkbox"/> No | 43 Owner Notified<br><input type="checkbox"/> Yes <input type="checkbox"/> No |
|-----------------|--------------------|--------------------------------------|---|---|---|

|                    |                     |                   |          |                              |
|--------------------|---------------------|-------------------|----------|------------------------------|
| 44 Tow Information | Location Towed From | Location Towed To | Towed by | Tow Truck Operator Signature |
|--------------------|---------------------|-------------------|----------|------------------------------|

|                       |             |            |             |      |      |                              |      |      |
|-----------------------|-------------|------------|-------------|------|------|------------------------------|------|------|
| 45 Detective Notified | Sequence No | Assignment | Unit Number | Date | Time | 46 Medical Examiner Notified | Date | Time |
|-----------------------|-------------|------------|-------------|------|------|------------------------------|------|------|

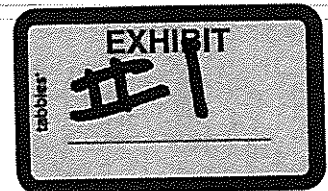
|                              |             |      |                             |      |
|------------------------------|-------------|------|-----------------------------|------|
| 47 Crime Lab Technician Name | Unit Number | Time | 48 Hot Desk Person Notified | Time |
|------------------------------|-------------|------|-----------------------------|------|

|   |   |      |   |
|---|---|------|---|
| 49 Communications Supervisor Notified<br><input type="checkbox"/> Yes <input type="checkbox"/> No | 50 Citywide Broadcast<br><input type="checkbox"/> Yes <input type="checkbox"/> No | Time | 51 Victim Assistance/Incident Information: Explain Form(s) Provided<br><input type="checkbox"/> Yes <input type="checkbox"/> No |
|---|---|------|---|

|  |
|--|
| 52 Copies Forwarded To<br>Liquor Board |
|--|

Conf'd Sections Narrative: (1) Continuation of any preceding forms. (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 copies 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: K. Anand, Inc.  
T/A: Hubcap Inn  
6001 Belair Road  
Baltimore, Md 21206



Liquor License#: LBD7 032

Licensee: Prince Anand

Continued

|  |                     |                        |           |
|--|---------------------|------------------------|-----------|
| 53 Reporting Officer Name (PRINT CLEARLY)<br>Det. L.C. Greenhill III | Sequence No<br>F820 | Assignment<br>IIS-Vice | Signature |
|--|---------------------|------------------------|-----------|

|  |                     |                        |           |
|--|---------------------|------------------------|-----------|
| 54 Approving Supervisor Rank and Name<br>Det. Sgt. Chris Leisher | Sequence No<br>G307 | Assignment<br>IIS-Vice | Signature |
|--|---------------------|------------------------|-----------|

|                        |             |      |      |             |                |
|------------------------|-------------|------|------|-------------|----------------|
| 55 RMS Data Entered By | Sequence No | Date | Time | 56 Reviewer | 57 Referred To |
|------------------------|-------------|------|------|-------------|----------------|

REPORT SHOULD BE TYPED OR LEGIBLY PRINTED IN BLACK INK

POLICE DEPARTMENT  
BALTIMORE, MARYLAND

|  |  |   |
|--|--|---|
| 1 Crime / Incident<br>Liquor Board Violation   | Attempt <input type="checkbox"/>   | 2 Complaint Number<br>4-1807-08991  |
| 3 Location of Offense / Incident (Street Address - Zip)<br>6001 Belair Road - 21206        |  | Page 2 of 2   |
| 4 Date / Time of This Report<br>24 July 18 - 2355hrs                                       |  | 5 Arrest / Custody Number   |
| 11 Original Report Date / Time<br>18 July 18 - 2240hrs                                     |  | 12 Offense / Incident Changed From  |
| 13 Case Status<br><input type="checkbox"/> Open <input checked="" type="checkbox"/> Closed | 14 Multiple Clearance<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | 15 Case Disposition<br><input checked="" type="checkbox"/> Cleared <input type="checkbox"/> Not Cleared |
| 16 Follow-up<br><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 of Business<br>Greenhill, L.C. III                      | Residence / Address (Include City County State Zip)<br>601 E. Fayette St. - 21202                       |
|  |  | Sex: M Race: B Age: 48 DOB:   |

Continuation  Follow Up

Person  Property  Miscellaneous  Vehicle  Missing Person  Custody

|  |                             |   |               |  |
|--|-----------------------------|---|---------------|--|
| 6 Unit<br>4841   | 7 Post of Occurrence<br>425 | 8 Reporting Area  | 9 Street Code | 10 CAD Number<br>3076  |
| 13 Case Status   |                             | 14 Multiple Clearance   |               | 15 Case Disposition  |
| <input type="checkbox"/> Open <input checked="" type="checkbox"/> Closed |                             | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |               | <input checked="" type="checkbox"/> Cleared <input type="checkbox"/> Not Cleared |

|                         |   |   |                             |
|-------------------------|---|---|-----------------------------|
| 19 Complainant / Victim | Name (Last, First, MI), or Firm Name of Business<br>Greenhill, L.C. III | Residence / Address (Include City County State Zip)<br>601 E. Fayette St. - 21202 | Sex: M Race: B Age: 48 DOB: |
|-------------------------|---|---|-----------------------------|

20 Copies Forwarded To  
Liquor Board

Cont'd Section: 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, time. (5) Recommend case status when applicable. (6) Multiple Clearance, include all affected complaint/case numbers.

On 18 July 18 at 2240hrs(10:40pm), Detective Greenhill along with members of IIS-Vice, as well as Liquor Agent John Chrissomallis from the Baltimore City Liquor Control Board, conducted an Underage Sales to Minor Investigation at the "Hubcap Inn" located at 6001 Belair Road. Also working was Baltimore City Police Cadet Jaquan Kai Dickerson with a date of birth of [REDACTED] December 1998, making him 19 years of age at the time of this investigation. Cadet Dickerson whom was working in an undercover capacity, entered the "Hubcap Inn" located at 6001 Belair Road and purchased a 375ml of "Peach Amsterdam" vodka from server, Mister Mukesh Kumar Acharya, M/O/36, 09/[REDACTED]81. Cadet Dickerson paid using a departmental \$20 and recieved change. Cadet Dickerson exited the establishment and advised members of Vice as well as the Liquor Board that he had just purchased alcohol from the establishment known as the "Hubcap Inn".

Minutes later Sgt Leisher along with Liquor Agent John Chrissomallis entered the location identified as the "Hubcap Inn". Sgt Leisher recovered the departmental \$20 and the change recieved was returned back to the establishment. Liquor Agent Chrissomallis photographed the "Peach Amsterdam" vodka and returned it back to the establishment as well. Detective Greenhill along with Liquor Agent Chrissomallis explained to Mister Acharya that he would not be criminally charged, but an administrated report would be written up for the establishment. The establishment was left in the control of Mister Acharya.

Report to be forwarded to the Liquor Board for further administrated review.

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. L.C. Greenhill III Sequence No. Assignment F820 IIS-Vice Signature \_\_\_\_\_

23 Approving Supervisor Rank and Name Det. Sgt. Chris Leisher Sequence No. Assignment G307 IIS-Vice Signature \_\_\_\_\_

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

Back



## Board of Liquor License Commissioners

For Baltimore City  
1 North Charles Street, 15th Floor  
Baltimore, Maryland, 21201

### INVESTIGATION REPORT

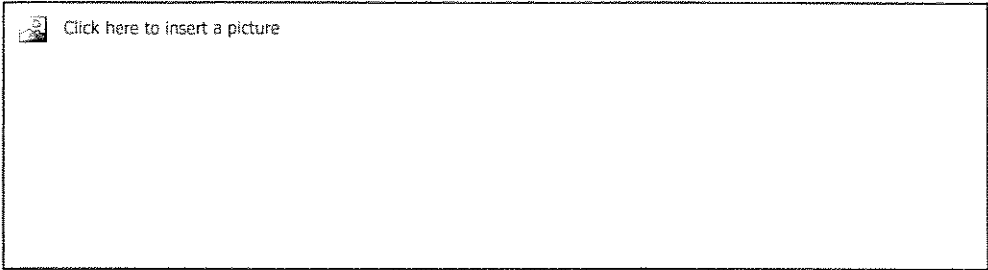
|  |                        |
|--|------------------------|
| Location Address:                      | 6001 BELAIR ROAD 21206 |
| Licensee Information (Trade Name):     | HUBCAP INN             |
| Corporation Name                       | K. ANAND, INC.         |
| License Type:                          | Select...              |
| Owner Email:                           |                        |
| Contact:                               |                        |
| Bouncer/Security Name (if applicable): |                        |
| Incident Date/Time                     | 9/25/2018 9:07:04 AM   |

**Report Facts:**

On or about July 18, 2018 at approx. 10:40 pm I Agent Chrissomallis while on duty working with the Underage Task Force with members of the BPD Vice Unit Det. Greenhill and Det Sgt. Leisher along with BPD Cadet Dickerson who was under the age of 21 during this investigation and was working in an undercover capacity where conducting underage investigations throughout the city. We arrived at 6001 Belair Road in the city of Baltimore and the state of Maryland known as Hupcap Inn. Once at the location the cadet entered the establishment and purchased a bottle of Peach Amsterdam using a departmental 20. The server later identified as one Mukesh Kumar Acharya with a DOB of 9/28/81 received the 20 for exchange for the Amsterdam gave the cadet change. Cadet Dickerson exited the location and notified the members of the team. Sgt. Leisher and my self entered the location identified the server explained to him that he had served an underage police cadet and recovered the departmental 20 and gave server back the change and the product. We explained the violation and the process and left the location without any further incident.


Disregard dates and times in the heading of this report. Actual dates and times are in the body of this report.

Photos Taken:



Attach Additional Photos

*Report Prepared By:*

| Inspector(s)                           | Submission Date   |
|--|---|
| i:\0#.w\ baltimore\john.chrissomalliss | 9/25/2018  |
| Submit                                 |   |





## Liquor Board System

Version 1.0

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

### License Detail

#### License Info

License Num: **LBD7 032**      Cert Num: **0157**      Fee: **\$1,320.00**      Status: **Renewed**  
 License Date: **5/1/2018**      License Year: **2018**  
 CR Number: **14420269**  
 Payment Date: **04-24-18**

2017 - 2018 TPP Paid   
 2018 Trader's License

*9/23/18*

#### Add Adult Entertainment License

#### Location

Corp Name: **K. ANAND, INC.**  
 Trade Name: **HUBCAP INN**  
 Zone Code: **43**  
 Phone: **410-325-2647**

Block Num: **6001**      Street: **BELAIR ROAD**  
 City: **BALTIMORE**      State: **MD**      Zip: **21206**

CR Number: **14420269**

#### Portion of Business Used:

USE PREMISES FOR TAVERN/RESTAURANT WITH LIVE ENTERTAINMENT/DANCING WITH  
 OUTDOOR TABLE SERVICE AS PER BMZA 246-97X WITH CONDITIONS (2ND FLOOR AND  
 RESTROOMS; NOT TO BE USED AT THIS TIME PER BCFD 10/24/11)

THERE IS TO BE NO SEPARATE PACKAGE GOODS STORE OR DEPARTMENT. ALL PACKAGE GOODS TO BE SOLD OVER THE BAR. GO GO GIRLS NOT PERMITTED.

*NOT IN  
CORP (GOOD  
T.L ✓ (STD)  
TRJ*

#### License Owners

| First Name | Last Name | Street                | City      | State | Zip   | Action                              | Change Owner                                |
|------------|-----------|-----------------------|-----------|-------|-------|-------------------------------------|---|
| PRINCE     | ANAND     | 8210 ANNADANIEL DRIVE | BALTIMORE | MD    | 21237 | <input type="button" value="Edit"/> | <input type="button" value="Remove Owner"/> |

#### Comments

| Date | Comment | Action |
|------|---------|--------|
|      |         |        |

|            |   |        |
|------------|---|--------|
| 04/25/2018 | *****RELEASED STATE OF MD TAX HOLD***** ... /sb   | Delete |
| 02/08/2018 | ****STATE OF MD TAX HOLD, letter sent to Licensee on February 8, 2018.****/mb   | Delete |
| 01/10/2018 | Mailed letter of recognition for underage drinking compliance check on 1/3/2018 /kk   | Delete |
| 05/21/2015 | Alcohol Awareness Course expires on 04/11/2019 (Prince Anand )  | Delete |
| 02/26/2013 | 2/21/2013 Public Hearing re: VIOLATION of Rule 4.01(a) Sale to Minor 1/23/13. GUILTY \$500  | Delete |
| 10/02/2012 | 9/27/2012 Public Hearing re: VIOLATION of Rule 4.18 Charter not in good standing. Submitted required documentation. Paid \$125 fine in lieu of hearing.                       | Delete |
| 06/03/2011 | 3/10/11 Public Hearing re: Application to transfer ownership of Class BD7 Beer, Wine & Liquor License and request to add live entertainment & off-premises catering. APPROVED | Delete |

Print History (Print Card)

License num: LBD7 032

Address: 6001 BELAIR ROAD

Trade Name: HUBCAP INN

Comment:

Add Comment

Hold Info

Powered by:



## ➤ Maryland Business Express

🏠 Home

👤 Log In / Create Account

### K. ANAND, INC.: D13925110

**General Information**

Filing History

Annual Report/Personal Property

## General Information

**Department ID Number:**

D13925110

**Business Name:**

K. ANAND, INC.

**Principal Office:**

6001-6003 BELAIR ROAD  
BALTIMORE MD 21206

**Resident Agent:**

PRINCE ANAND  
8210 ANNA DANIEL DR.  
ROSEDALE MD 21237

**Status:**

INCORPORATED

**Good Standing:**

THIS BUSINESS IS NOT IN GOOD  
STANDING

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

» **Order Certificate of Status**

**Reason(s) Entity is NOT in Good Standing:**

Personal Property: \$52 Penalty Due for 2018 » **Details**

**Business Type:**

CORPORATION

**Business Code:**

03 ORDINARY BUSINESS - STOCK

**Date of Formation/ Registration:**

01/20/2011

**State of Formation:**

MD

**Stock Status:**

STOCK

**Close Status:**

YES

October 11, 2018

**Licensee(s):** Auretta Bisignani and Monir Chowdhury  
Jams Investment, Inc., T/a Stockmarket Bar  
3538 S. Hanover Street 21225

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

**Violation of Rule 4.01(a) Sales to Minors – July 18, 2018** – At approximately 9:20 PM, the Baltimore City Police Department and the BLLC conducted random, joint investigations of establishments to determine if licensees would sell alcoholic beverages to minors. The joint task force responded to the establishment and sent Baltimore City Police Cadet Jaquan Dickerson, who is under the age of 21, into the establishment to attempt to purchase an alcoholic beverage(s). At that time, Dickerson entered the establishment and purchased a 375 ml bottle of New Amsterdam Peach Vodka. Utilizing a departmental \$20 bill, Dickerson purchased the alcoholic beverage(s) from bartender/store clerk Ms. Sheila Best. Dickerson then communicated to the task force that he had purchased an alcoholic beverage(s). Members of the task force entered the establishment and notified Ms. Best that an alcoholic beverage(s) had just been purchased by a minor and it would be reported to the BLLC. The task force then recovered the marked currency and returned both the alcoholic beverage(s) to the bartender and/or any change that was provided to Dickerson.

(a) **Service on Licensee(s):** Summons issued to the licensee(s) on 9/25/2018.

(b) **Witness Summoned:** Summons issued to Inspector John Chrissomallis on 9/25/2018. Summons issued to Baltimore City Police Dept.: Sgt. Leisher, Det. Greenhill, and Cadet Dickerson on 9/25/2018.

(c) **Violation History of Current Corporation:** Licensee appeared before the Board on 2/21/2013 in reference to:

- Violation of Rule 4.01(a) - Sales to Minors
- Guilty
- \$500 fine + \$125 admin fee
- \$625 total fine

Licensee appeared before the Board on 8/22/2008 in reference to:

- Violation of Rule 4.01(a) - Sales to Minors
- Guilty
- \$2,250 fine – suspended \$500
- \$125 admin fee waived
- \$1,750 total fine

(d) **License Transfer Date:** The license transferred to the above named corporation on 11/30/2004.

**Board's Decision:**

State of Maryland

Board of Liquor License Commissioners

for Baltimore City  
1 N. Charles Street, Suite 1500  
Baltimore, Maryland, 21201-3724  
Phone: (410) 396-4377

**NOTICE**

To: Jams Investment, Inc.  
T/A Stock Market Bar  
3538 South Hanover Street

Date: September 24, 2018

**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 11th day of October 2018, 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 the Alcoholic Beverages Article, as amended, should not be suspended or revoked as required by this Board by Section 4-604 of said Article, following your conviction and/or violation of said law, to wit:

**Location of Incident:** T/A Stock Market Bar, 3538 South Hanover Street, Baltimore, MD ("the establishment").

**Violation of Rule 4.01(a) Sales to Minors – July 18, 2018** – At approximately 9:20 PM, the Baltimore City Police Department and the BLLC conducted random, joint investigations of establishments to determine if licensees would sell alcoholic beverages to minors. The joint task force responded to the establishment and sent Baltimore City Police Cadet Jaquan Dickerson, who is under the age of 21, into the establishment to attempt to purchase an alcoholic beverage(s). At that time, Dickerson entered the establishment and purchased a 375 ml bottle of New Amsterdam Peach Vodka. Utilizing a departmental \$20 bill, Dickerson purchased the alcoholic beverage(s) from bartender/store clerk Ms. Sheila Best. Dickerson then communicated to the task force that he had purchased an alcoholic beverage(s). Members of the task force entered the establishment and notified Ms. Best that an alcoholic beverage(s) had just been purchased by a minor and it would be reported to the BLLC. The task force then recovered the marked currency and returned both the alcoholic beverage(s) to the bartender and/or any change that was provided to Dickerson.

**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 the Alcoholic Beverages Article of the Annotated Code of Maryland for reference purposes. If you have any questions or concerns regarding this matter please contact Deputy Executive Secretary, Thomas R. Akras at 410-396-4377.**

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

**Albert Matricciani, Jr., Chairman**

**BOARD OF LIQUOR LICENSE  
COMMISSIONERS  
FOR BALTIMORE CITY**

INCIDENT REPORT  
Form 04/008  
1160-25-68

POLICE DEPARTMENT  
BALTIMORE, MARYLAND

Person  Property  Vehicle  Miscellaneous  
Domestic Related  Gang Related  Juvenile Related  Hate Crime

|  |   |   |
|--|---|---|
| 1 Crime / Incident<br>Liquor Board Violation   | Attempt <input type="checkbox"/>  | 2 Complaint Number<br>9-1807-08565  |
| 3 Location of Offense / Incident (Exact Street Address)<br>3538 South Hanover Street - 21225 |   | Page 1 of 2   |
| 4 Date / Time Occurred<br>18 July 2018 - 2120hrs   |   | 5 Date / Time Reported<br>23 July 18 - 2350hrs  |
| 11 Location Given by Dispatcher<br>On-View   |   | 12 Companion Report No  |
| 13 Case Status<br><input type="checkbox"/> Open <input checked="" type="checkbox"/> Closed   | 14 Case Disposition<br><input checked="" type="checkbox"/> Cleared <input type="checkbox"/> Not Cleared | 15 Follow-up<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                 |
| 16 Crime Code  | 17 Crime Classification   | 18 Describe Location of Offense or Type of Premise<br>Tavern  |
|  |   | 19 Reported by Crime Watcher<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

|  |  |  |                                    |             |  |     |
|--|--|--|------------------------------------|-------------|--|-----|
| 20 Complainant / Victim<br>Name (Last, First, MI), or Firm Name If Business<br>Greenhill, L.C. III | Residence / Address (Include City, County, State, Zip)<br>601 E. Fayette St. - 21202 |  | Sex<br>M                           | Race<br>37  | Age<br>48  | DOB |
| Where Employed or School Attending (Include City Located)<br>BPD - IIS-Vice                        | Occupation<br>Detective  | Hours of Employment<br>Varied  | Residence Phone                    | Other Phone | Sobriety<br>sbr  |     |
| 21 Injuries and Location on Body   | Victim's Condition   | Victim Hospitalized / Facility<br><input type="checkbox"/> Yes <input type="checkbox"/> No | 22 Victim / Assailant Relationship |             | 23 Current / Former Cohabitant<br><input type="checkbox"/> Yes <input type="checkbox"/> No |     |

|   |                        |  |           |                 |  |                 |                       |
|---|------------------------|--|-----------|-----------------|--|-----------------|-----------------------|
| 24 Reporting Person<br>Name (Last, First, MI)<br>SA #20                         | Sex<br>M               | Race<br>37                                 | Age<br>48 | DOB             | Address (Include City, County, State, Zip)<br>SA #20 | Residence Phone | Other Phone<br>SA #20 |
| 25 Witness Parent/Guardian<br><input type="checkbox"/> <input type="checkbox"/> | Name (Last, First, MI) | Address (Include City, County, State, Zip) |           | Residence Phone | Other Phone  |                 |                       |

|                                      |  |   |      |             |       |            |               |               |        |  |
|--------------------------------------|--|---|------|-------------|-------|------------|---------------|---------------|--------|--|
| 26 Suspect<br>Name (Last, First, MI) | Address (Include City, County, State, Zip) |   |      | Sex         | Race  | Age        | DOB           | Height        | Weight |  |
| Completion                           | Hair Color/Length/Style                    | Hair  | Eyes | Facial Hair | Teeth | Shirt/Coat |               | Arrest Number |        |  |
| Parts                                | 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 Escape |
| 32 Weapon / Means of Attack                         | 33 Method Used to Commit Crime | 34 Type of Property Taken | 35 Total Loss Value |                        |

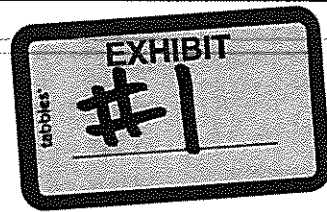
|  |            |  |  |  |  |  |  |  |  |
|--|------------|--|--|--|--|--|--|--|--|
| 36 Vehicle Information<br><input type="checkbox"/> Suspect <input type="checkbox"/> Victim <input type="checkbox"/> Stolen <input type="checkbox"/> Towed <input type="checkbox"/> Other | Tag Number | State  | Expiration   | Vehicle Year/Make  | Model  | Body Style/Color   | Mileage  |  |  |
| Vehicle Identification Number (VIN)  |            | Ignition Locked  | Keys in Ignition   | Doors Locked   | Windows Closed   | Radio in Car   | Battery in Car   | Spare Tire in Car  | Trunk Locked   |
|  |            | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <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<br><input type="checkbox"/> Yes <input type="checkbox"/> No | 42 Tow List Check<br><input type="checkbox"/> Yes <input type="checkbox"/> No | 43 Owner Notified<br><input type="checkbox"/> Yes <input type="checkbox"/> No |  |  |
| 44 Tow Information                         | Location Towed From | Location Towed To                    | Towed by |     | Tow Truck Operator Signature   |   |   |  |  |

|   |   |            |  |      |      |                              |      |      |
|---|---|------------|--|------|------|------------------------------|------|------|
| 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                         |      |      |
| 49 Communications Supervisor Notified<br><input type="checkbox"/> Yes <input type="checkbox"/> No | 50 Citywide Broadcast<br><input type="checkbox"/> Yes <input type="checkbox"/> No | Time       | 51 Victim Assistance/Accident Information Explain Form(s) Provided<br><input type="checkbox"/> Yes <input type="checkbox"/> No |      |      |                              |      |      |

52 Copies Forwarded To  
Liquor Board

|   |   |  |  |  |  |  |  |  |
|---|---|--|--|--|--|--|--|--|
| Conf'd Sections   | Narrative (1) Continuation of any preceding forms. (2) Property Listing. It include property taken and seized/retained 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: Jams Investment, Inc.<br>T/A: Stockmarket Bar<br>3538 South Hanover Street<br>Baltimore, Md 21225 |   |  |  |  |  |  |  |  |
| Liquor License# LBD7 054  |   |  |  |  |  |  |  |  |
| Licensee Monir A. Chowdhury, Aretta I. Bisigani   |   |  |  |  |  |  |  |  |



|  |                     |                        |           |
|--|---------------------|------------------------|-----------|
| 53 Reporting Officer Name (PRINT CLEARLY)<br>Det. L.C. Greenhill III | Sequence No<br>F820 | Assignment<br>IIS-Vice | Signature |
| 54 Approving Supervisor Rank and Name<br>Det. Sgt. Chris Leisher     | Sequence No<br>G307 | Assignment<br>IIS-Vice | Signature |
| 55 RMS Data Entered By   | Sequence No         | Date                   | Time      |
| 56 Reviewer  | 57 Referred To      |                        |           |

REPORT SHOULD BE TYPED OR LEGIBLY PRINTED IN BLACK INK

POLICE DEPARTMENT  
BALTIMORE, MARYLAND

|  |                             |  |                                    |
|--|-----------------------------|--|------------------------------------|
| 1 Crime / Incident<br>Liquor Board Violation   |                             | Attempt <input type="checkbox"/>                         | 2 Complaint Number<br>9-1807-08565 |
| 3 Location of Offense / Incident (Street Address - Zip)<br>3538 South Hanover Street - 21225 |                             |  | Page 2 of 2                        |
| 4 Date / Time of This Report<br>23 July 18 - 2350hrs   |                             | 5 Arrest / Custody Number                                |                                    |
| 6 Unit<br>4841   | 7 Post of Occurrence<br>912 | 8 Reporting Area   | 9 Street Code                      |
| 10 CAD Number<br>3130  |                             | 11 Original Report Date / Time<br>18 July 2018 - 2120hrs |                                    |
| 12 Offense / Incident Changed From   |                             |  |                                    |

Continuation

Follow Up

Person  Property  Miscellaneous  Vehicle  Missing Person  Custody

|  |  |   |         |   |               |                         |
|--|--|---|---------|---|---------------|-------------------------|
| 13 Case Status<br><input type="checkbox"/> Open <input checked="" type="checkbox"/> Closed     | 14 Multiple Clearance<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | 15 Case Disposition<br><input checked="" type="checkbox"/> Cleared <input type="checkbox"/> Not Cleared | Explain | 16 Follow-Up<br><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<br>Greenhill, L.C. III |  | Residence / Address (Include City County State Zip)<br>601 E. Fayette St. - 21202                       |         |   | Sex<br>M      | Race<br>B               |

20 Copies Forwarded To  
Liquor Board

Confid Sections Narrative (1) Continuation of any preceding items. (2) Property Listing, to include property taken and seized/submitted evidence/property. (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 complaint/case numbers.

On 18 July 18 at 2120hrs(9 20pm), Detective Greenhill along with members of IIS-Vice, as well as Liquor Agent John Chrissomallis from the Baltimore City Liquor Control Board, conducted an Underage Sales to Minor Investigation at the "Stockmarket Bar" located at 3538 South Hanover Street. Also working was Baltimore City Police Cadet Jaquan Kai Dickerson with a date of birth of December 1998, making him 19 years of age at the time of this investigation. Cadet Dickerson whom was working in an undercover capacity, entered the "Stockmarket Bar" located at 3538 South Hanover Street and purchased a 375ml of "Peach Amsterdam" vodka from server, Miss Sheila Best, F/B/64, 05/54. Cadet Dickerson paid using a departmental \$20 and recieved change. Cadet Dickerson exited the establishment and advised members of Vice as well as the Liquor Board that he had just purchased alcohol from the establishment known as "Stockmarket Bar".

Minutes later Sgt Leisher along with Liquor Agent John Chrissomallis entered the location identified as the "Stockmarket Bar". Sgt Leisher recovered the departmental \$20 and the change recieved was returned back to the establishment. Liquor Agent Chrissomallis photographed the "Peach Amsterdam" vodka and returned it back to the establishment as well. Detective Greenhill along with Liquor Agent Chrissomallis explained to Miss Best that she would not be criminally charged, but an administrated report would be written up for the establishment. The establishment was left in the control of manager Miss Best.

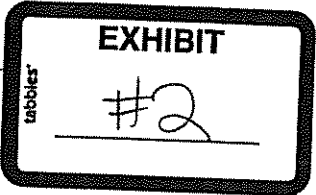
Report to be forwarded to the Liquor Board for further administrated review.

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)<br>Det. L.C. Greenhill III | Sequence No Assignment<br>F820 | IIS-Vice | Signature |
| 23 Approving Supervisor Rank and Name<br>Det. Sgt. Chris Leisher     | Sequence No Assignment<br>G307 | IIS-Vice | Signature |
| 24 RMS Data Entered By   | Sequence No                    | Date     | Time      |
| 25 Reviewer  | 28 Forward To                  |          |           |

Back



### Board of Liquor License Commissioners

For Baltimore City  
1 North Charles Street, 15th Floor  
Baltimore, Maryland, 21201

## INVESTIGATION REPORT

|  |  |
|--|--|
| Location Address:                      | 3538 HANOVER STREET SOUTH 21225                  |
| Licensee Information (Trade Name):     | STOCKMARKET BAR                                  |
| Corporation Name                       | JAMS INVESTMENT, INC.                            |
| License Type:                          | Class "BD7" Beer, Wine and Liquor                |
| Owner Email:                           |  |
| Contact:                               |  |
| Bouncer/Security Name (if applicable): | <input type="text"/> D.O.B. <input type="text"/> |
| Incident Date/Time:                    | 9/24/2018 2:37:44 PM                             |

**Report Facts:**

On or about July 18, 2018 at approx. 9:20 pm I Agent Chrissomalllis while on duty and working with the BPD Vice Unit Det. Greenhill, Det. Sgt. Leisher and BPD Cadet Dickerson who worked in an undercover capacity and was under the age of 21 during these investigations conducted underage investigations throughout the city. We arrived at 3538 Hanover Street in the City of Baltimore and the State of Maryland to the location known as Stockmarket. Once at the location the cadet entered the establishment and purchased a bottle of peach Amsterdam using a departmental 20.00. Once the cadet exited the location he notified the members of the team and we entered the location and identified the server as one Sheila Best with a DOB of 5/15/54. We recovered the departmental 20.00 explained to her that she had served an underage police cadet, returned the change and the product. We explained the violation and the process and left the location without any further incident.

Disregard dates and times in the heading of this report. Actual dates and times are in the body of this report.

Photos Taken:





Click here to insert a picture

Attach Additional Photos

*Report Prepared By:*

Inspector(s)

Submission Date

i:\0# w| baltimore\john.chrissomalliss

9/24/2018

Submit



## Liquor Board System

Version 1.0

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

### License Detail

#### License Info

License Num: **LBD7 064**      Cert Num: **0240**      Fee: **\$1,320.00**      Status: **Renewed**  
 License Date: 5/1/2018      License Year: 2018  
 CR Number: 11587187  
 Payment Date: 04-24-18

2017 - 2018 TPP Paid  N  
 2018 Trader's License  Y     

9/23/18  


---

 CORP ✓  
 T.L ✓  
 TPP

#### Add Adult Entertainment License

#### Location

Corp Name: **JAMS INVESTMENT, INC.**  
 Trade Name: **STOCKMARKET BAR**  
 Zone Code: 3  
 Phone: 410-355-1400

Block Num: 3538      Street: HANOVER STREET SOUTH  
 City: BALTIMORE      State: MD      Zip: 21225

CR Number: 11587187

Portion of Business Used:  
 FIRST FLOOR FOR BUSINESS & BASEMENT FOR STORAGE - SECOND FLOOR FOR STORAGE AND OFFICE

Restriction:  
 ALVIN HARRIS & DIANE GRAY ARE BARRED FROM PREMISES IN ANY CAPACITY.

#### License Owners

| First Name | Last Name | Street               | City       | State | Zip   | Action                              | Change Owner                                |
|------------|-----------|----------------------|------------|-------|-------|-------------------------------------|---|
| AURETTA I. | BISIGNANI | 3811 E. PRATT STREET | BALTIMORE  | MD    | 21224 | <input type="button" value="Edit"/> | <input type="button" value="Remove Owner"/> |
| MONIR A.   | CHOWDHURY | 5221 E. JOPPA ROAD   | PERRY HALL | MD    | 21128 | <input type="button" value="Edit"/> | <input type="button" value="Remove Owner"/> |

#### Comments

|  |
|--|
|  |
|--|

| Date       | Comment   | Action |
|------------|---|--------|
| 08/22/2018 | Alcohol Awareness expires on 08/19/22 (Sheila Best) John S Murray..... /sb  | Delete |
| 04/20/2018 | ****RELEASED STATE OF MD TAX HOLD****.... /sb   | Delete |
| 03/01/2018 | Mailed letter of recognition for underage drinking compliance check on 2/15/2018 /kk  | Delete |
| 01/25/2018 | ****STATE OF MD TAX HOLD, letter sent to Licensee on January 23, 2018.****/mb   | Delete |
| 03/24/2016 | Alcohol Awareness expires on 03/06/2020 (Monir A. Chowdhury)  | Delete |
| 03/04/2016 | RELEASED STATE OF MD TAX HOLD.... /sb   | Delete |
| 01/19/2016 | State of MD Tax Hold, letter sent... /sb  | Delete |
| 04/24/2015 | RELEASED STATE OF MD TAX HOLD.... /sb   | Delete |
| 02/02/2015 | State of MD Tax Hold, letter sent to merchant on January 23, 2015.  | Delete |
| 02/26/2013 | 2/21/2013 Public Hearing re: VIOLATION of Rule 4.01(a) Sale to minor 1/16/13. GUILTY \$500  | Delete |
| 11/20/2008 | 09/19/08 \$1750 FINE PAID I FULL #64913   | Delete |
| 08/25/2008 | 08/22/08 Public Hearing re: Violation of rule 4.01(a)DECISION: RULE 4.01(a) GUILTY \$2250/SUSPENDED \$500-WAVIED \$125 ADM.FEE.FINE TO BE PAID IN 30 DAYS-FINE \$1750 | Delete |

Print History (Print Card)

License num: LBD7 064                      Address: 3538 HANOVER STREET SOUTH  
 Trade Name: STOCKMARKET BAR

Comment:

Add Comment

**Hold Info**



⊖ Maryland Business Express

🏠 Home

🔑 Log In / Create Account

**JAMS INVESTMENT, INC.: D07920671**

General Information

Filing History

Annual Report/Personal Property

General Information

**Department ID Number:**  
D07920671

**Business Name:**  
JAMS INVESTMENT, INC.

**Principal Office:**  
3538 HANOVER STREET  
BALTIMORE MD 21225

**Resident Agent:**  
AURETTA IRENE BISIGNANI  
3538 HANOVER STREET  
BALTIMORE MD 21225

**Status:**  
REVIVED

**Good Standing:**  
THIS BUSINESS IS IN GOOD  
STANDING  
» **Order Certificate of Status**

**Business Type:**  
CORPORATION

**Business Code:**  
03-ORDINARY-BUSINESS-STOCK

**Date of Formation/ Registration:**  
04/26/2004

**State of Formation:**  
MD

**Stock Status:**  
STOCK

**Close Status:**  
YES

October 11, 2018

**Licensee(s):** Nickolaos Hapsis, Emmanuel Karelas, and Dimitri Vengalakos  
TDF Corporation, T/a Loafers 2  
1401 Bloomfield Avenue 21227

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

**Violation of Rule 4.01(a) Sales to Minors – August 7, 2018** – At approximately 11:45 PM the Baltimore City Police Department and the BLLC conducted random, joint investigations of establishments to determine if licensees would sell alcoholic beverages to minors. The joint task force responded to the establishment and sent Baltimore City Police Cadet Cecil Harris, who is under the age of 21, into the establishment to attempt to purchase an alcoholic beverage(s). At that time, Harris entered the establishment and requested a bottle of "Corona" beer from the bartender, Ms. Nikita Pope. Upon Harris' request, Ms. Pope furnished him a beer by opening a bottle of "Corona" beer, placing it in front of Harris, and walking away. Harris then communicated to the task force that he was furnished an alcoholic beverage(s). Members of the task force entered the establishment and notified Ms. Pope that an alcoholic beverage was furnished to a minor and it would be reported to the BLLC.

(a) **Service on Licensee(s):** Summons issued to the licensee(s) on 9/25/2018.

(b) **Witness Summoned:** Summons issued to Inspector John Chrissomallis on 9/25/2018. Summons issued to Baltimore City Police Dept.: Sgt. Leisher, Det. Gatto, and Cadet Harris on 9/25/2018.

(c) **Violation History of Current Corporation:** Licensee(s) appeared before the Board on 4/13/2017 in reference to:

- Violation of Rule 4.14(a) - Live Entertainment without Authorization
- Violation of Rule 4.14(a) - Live Entertainment without Authorization
- Guilty
- \$500 fine + \$125 admin fee
- \$625 total fine

Licensee(s) appeared before the Board on 5/28/2015 in reference to:

- Violation of Rule 4.01(a) - Sales to Minors
- \$250 fine + \$125 admin fee
- \$375 Total Fine

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(d) **License Transfer Date:** The license transferred to the above named corporation on 10/29/2010.

**Board's Decision:**

State of Maryland

Board of Liquor License Commissioners

for Baltimore City  
1 N. Charles Street, Suite 1500  
Baltimore, Maryland, 21201-3724  
Phone: (410) 396-4377

**NOTICE**

To: TDF Corporation  
T/A Loafers 2  
1401 Bloomfield Avenue

Date: September 24, 2018

**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 11th day of October 2018, 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 the Alcoholic Beverages Article, as amended, should not be suspended or revoked as required by this Board by Section 4-604 of said Article, following your conviction and/or violation of said law, to wit:

**Location of Incident:** T/A Loafers 2, 1401 Bloomfield Avenue, Baltimore, MD ("the establishment").

**Violation of Rule 4.01(a) Sales to Minors – August 7, 2018** – At approximately 11:45 PM the Baltimore City Police Department and the BLLC conducted random, joint investigations of establishments to determine if licensees would sell alcoholic beverages to minors. The joint task force responded to the establishment and sent Baltimore City Police Cadet Cecil Harris, who is under the age of 21, into the establishment to attempt to purchase an alcoholic beverage(s). At that time, Harris entered the establishment and requested a bottle of "Corona" beer from the bartender, Ms. Nikita Pope. Upon Harris' request, Ms. Pope furnished him a beer by opening a bottle of "Corona" beer, placing it in front of Harris, and walking away. Harris then communicated to the task force that he was furnished an alcoholic beverage(s). Members of the task force entered the establishment and notified Ms. Pope that an alcoholic beverage was furnished to a minor and it would be reported to the BLLC.

**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 the Alcoholic Beverages Article of the Annotated Code of Maryland for reference purposes. If you have any questions or concerns regarding this matter please contact Deputy Executive Secretary, Thomas R. Akras at 410-396-4377.**

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

**Albert Matricciani, Jr., Chairman**

BOARD OF LIQUOR LICENSE  
COMMISSIONERS  
FOR BALTIMORE CITY

INCIDENT REPORT  
Form 8  
1180-25-66  
Revised 12/17

POLICE DEPARTMENT  
BALTIMORE, MARYLAND

Person  Property  Vehicle  Miscellaneous  
 Domestic Related  Gang Related  Juvenile Related  Hate Crime  Investigative Stop

|   |  |   |
|---|--|---|
| 1 Crime / Incident<br>Liquor Board Violation  | Attempt? <input type="checkbox"/>  | 2 Complaint Number<br>8-180803134       |
| 3 Location of Offense / Incident (Exact Street Address)<br>1401 Bloomfield Ave                          |  | Page 1 of 2                             |
| 4 Date / Time Occurred<br>8/7/2016 @ 2345 hrs   | 5 Date / Time Reported same #4   |   |
| 6 Unit<br>4844  | 7 Post of Occurrence<br>832  | 8 Reporting Area                        |
| 9 Street Code   | 10 CAD Number<br>2874  | 11 Location Given by Dispatcher on view |
| 12 Companion Report No  | 13 Case Status<br><input type="checkbox"/> Open <input checked="" type="checkbox"/> Closed |   |
| 14 Case Disposition<br><input checked="" type="checkbox"/> Cleared <input type="checkbox"/> Not Cleared | 15 Follow-Up<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No        | 16 Crime Code                           |
| 17 Crime Classification   | 18 Describe Location of Offense or Type of Premise<br>city bar                             |   |
| 19 Reported by Crime Watcher<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No     |  |   |

|  |   |  |   |  |   |  |  |
|--|---|--|---|--|---|--|--|
| 20 Complainant / Victim<br>Name (Last, First, MI) or Firm Name if Business<br>Gatto, A   | Residence / Address (Include City County State, Zip)<br>801 E. Fayette St               | Age  | DOB   | Height   | Weight  | Gender<br><input checked="" type="checkbox"/> M <input type="checkbox"/> F |  |
| Race: <input type="checkbox"/> Black <input type="checkbox"/> Asian or Pacific Islander <input type="checkbox"/> Native <input type="checkbox"/> Other | Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Unknown | Limited English Proficient? <input type="checkbox"/> Yes <input type="checkbox"/> No | If yes, Primary Language  | How did officer proceed? <input type="checkbox"/> Lang. Line <input type="checkbox"/> Qualified Bilingual Member | Professional Interpreter <input type="checkbox"/>   |  |  |
| Where Employed or School Attending (Include City Located)<br>bpd   | Occupation  | Hours of Employment  | Residence Phone   | Other Phone  | 21 Sobriety   |  |  |
| 21 Injuries and Location on Body   |   | Victim's Condition   | Victim Hospitalized Facility<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | 22 Victim / Assailant Relationship   | 23 Current / Former Consistent<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  |  |

|   |     |      |     |     |  |                 |             |
|---|-----|------|-----|-----|--|-----------------|-------------|
| 24 Reporting Person<br>Name (Last, First, MI)<br>Same #20 | Sex | Race | Age | DOB | Address (Include City, County, State, Zip) | Residence Phone | Other Phone |
|---|-----|------|-----|-----|--|-----------------|-------------|

|  |                        |  |                 |             |
|--|------------------------|--|-----------------|-------------|
| 25 Witness Parent/Guardian<br><input type="checkbox"/> | Name (Last, First, MI) | Address (Include City County State, Zip) | Residence Phone | Other Phone |
|--|------------------------|--|-----------------|-------------|

|   |   |  |                          |  |   |  |
|---|---|--|--------------------------|--|---|--|
| 26 Suspect<br>Name (Last, First, MI)<br>Poole, Nikita   | Address (Include City, County, State, Zip)  | Age  | DOB                      | Height   | Weight  | Gender<br><input type="checkbox"/> M <input checked="" type="checkbox"/> F |
| Race: <input checked="" type="checkbox"/> Black <input type="checkbox"/> Asian or Pacific Islander <input type="checkbox"/> Native <input type="checkbox"/> Other | Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Unknown | Limited English Proficient? <input type="checkbox"/> Yes <input type="checkbox"/> No | If yes, Primary Language | How did officer proceed? <input type="checkbox"/> Lang. Line <input type="checkbox"/> Qualified Bilingual Member | Professional Interpreter <input type="checkbox"/> |  |
| Complexion  | Hair Color/Length/Style   | Hair   | Eyes                     | Facial Hair  | Teeth   | Shriv/Coat   |
| 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 Escape |
| 32 Weapon / Means of Attack                         | 33 Method Used to Commit Crime | 34 Type of Property Taken | 35 Total Loss Value |                        |

|  |            |  |  |  |  |  |  |
|--|------------|--|--|--|--|--|--|
| 36 Vehicle Information<br><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   | Mileage  |
| Vehicle Identification Number (VIN)  |            | Ignition Locked  | Keys in Ignition   | Doors Locked   | Windows Closed   | Radio in Car   | Battery in Car   |
|  |            | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <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<br><input type="checkbox"/> Yes <input type="checkbox"/> No | 42 Tow Unit Check<br><input type="checkbox"/> Yes <input type="checkbox"/> No | 43 Owner Notified<br><input type="checkbox"/> Yes <input type="checkbox"/> No |
|-----------------|--------------------|--------------------------------------|--|---|---|

|                    |                     |                   |          |                              |
|--------------------|---------------------|-------------------|----------|------------------------------|
| 44 Tow Information | Location Towed From | Location Towed To | Towed by | Tow Truck Operator Signature |
|--------------------|---------------------|-------------------|----------|------------------------------|

|                       |                         |             |      |      |                              |      |      |
|-----------------------|-------------------------|-------------|------|------|------------------------------|------|------|
| 45 Detective Notified | Sequence No./Assignment | Unit Number | Date | Time | 46 Medical Examiner Notified | Date | Time |
|-----------------------|-------------------------|-------------|------|------|------------------------------|------|------|

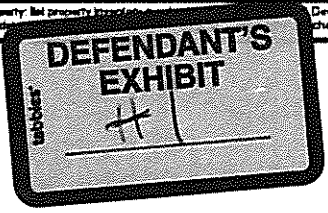
|                              |             |      |                             |      |
|------------------------------|-------------|------|-----------------------------|------|
| 47 Crime Lab Technician Name | Unit Number | Time | 48 Hot Desk Person Notified | Time |
|------------------------------|-------------|------|-----------------------------|------|

|  |  |   |
|--|--|---|
| 49 Communications Supervisor Notified<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | 50 Citywide Broadcast<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | 51 Victim Assistance/Incident Information Form(s) Provided<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|--|--|---|

52 Copies Forwarded To

Conf'd Sections: (1) Continuation of any preceding form, (2) Property Listing to include property taken and seized/submitted evidence/property list property involved, (3) Describe details of incident, include all steps taken in preliminary investigation, (4) List of additional notifications, including name, agency or assignment, unit number, telephone number, etc.

TDF Corporation  
Loafers 2  
1401 Bloomfield Ave  
Balto, Md 21227  
Emmanuel Kareles, Nicko Haspis, Dimitri Vengalacos



Continued

|   |                                      |           |
|---|--------------------------------------|-----------|
| 53 Reporting Officer Name (PRINT CLEARLY)<br>Gatto, A | Sequence No. Assignment<br>1115 VICE | Signature |
|---|--------------------------------------|-----------|

|   |                                      |           |
|---|--------------------------------------|-----------|
| 54 Approving Supervisor Rank and Name<br>Sgt. Lelsher | Sequence No. Assignment<br>G307 VICE | Signature |
|---|--------------------------------------|-----------|

|                        |             |      |      |             |                |
|------------------------|-------------|------|------|-------------|----------------|
| 56 RMS Data Entered By | Sequence No | Date | Time | 58 Reviewer | 57 Referred To |
|------------------------|-------------|------|------|-------------|----------------|

REPORT SHOULD BE TYPED OR LEGIBLY PRINTED IN BLACK INK

POLICE DEPARTMENT  
BALTIMORE, MARYLAND

|  |                                  |                                   |
|--|----------------------------------|-----------------------------------|
| 1 Crime / Incident<br>Liquor Board Violation | Attempt <input type="checkbox"/> | 2 Complaint Number<br>8-180803134 |
|--|----------------------------------|-----------------------------------|

Continuation       Follow Up

Person  Property  Miscellaneous  Vehicle  Missing Person  Custody

|   |             |
|---|-------------|
| 3 Location of Offense / Incident (Street Address, Zip)<br>1401 Bloomfield Ave | Page 2 of 2 |
|---|-------------|

|   |                           |
|---|---------------------------|
| 4 Date / Time of This Report<br>8/7/2018 @ 2345 hrs | 5 Arrest / Custody Number |
|---|---------------------------|

|                |                             |                  |               |                       |   |                                    |
|----------------|-----------------------------|------------------|---------------|-----------------------|---|------------------------------------|
| 6 Unit<br>4844 | 7 Post of Occurrence<br>832 | 8 Reporting Area | 9 Street Code | 10 CAD Number<br>2874 | 11 Original Report Date / Time<br>same #4 | 12 Offense / Incident Changed From |
|----------------|-----------------------------|------------------|---------------|-----------------------|---|------------------------------------|

|  |  |   |   |               |                         |
|--|--|---|---|---------------|-------------------------|
| 13 Case Status<br><input type="checkbox"/> Open <input checked="" type="checkbox"/> Closed | 14 Multiple Clearance<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | 15 Case Disposition<br><input checked="" type="checkbox"/> Cleared <input type="checkbox"/> Not Cleared | 16 Follow-up<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | 17 Crime Code | 18 Crime Classification |
|--|--|---|---|---------------|-------------------------|

|                                     |  |   |     |     |     |
|-------------------------------------|--|---|-----|-----|-----|
| 19 Complainant / Victim<br>Gatto, A | Name (Last, First, MI), or Firm Name of Business | Residence / Address (Include City, County, State, Zip)<br>601 E. Fayette St | Sex | Age | DOB |
|-------------------------------------|--|---|-----|-----|-----|

|  |   |   |
|--|---|---|
| Race<br><input type="checkbox"/> Black <input checked="" type="checkbox"/> White <input type="checkbox"/> Asian or Pacific Islander <input type="checkbox"/> Native American/Alaskan Native <input type="checkbox"/> Other | Gender<br><input type="checkbox"/> Male <input type="checkbox"/> Female | Ethnicity<br><input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino <input type="checkbox"/> Unknown |
|--|---|---|

20 Copies Forwarded To

Confidential 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/time. (5) Recommend case status when applicable. (6) If Multiple Clearance, include all affected complaint/case numbers.

On 8/7/2018 at approx 2345hrs. Members of the BPD Vice Unit and Baltimore City Liquor Board were utilizing BPD Cadet Harris who is under the legal drinking age of 21. Cadet Harris was given a \$20 dollar bill which was marked by a photograph prior to any investigations. At this time we sent Cadet Harris into 1401 Bloomfield Ave, which is known as Loafers 2. Once inside, Cadet Harris sat down at the bar and met with the server who was later identified as Nikita Pope of [REDACTED]. Cadet Harris asked server Pope for a bottle of Corona. At this time server Pope furnished Cadet Harris a bottle of Corona. At this time Cadet Harris notified your writer and other members of the unit of the alcohol furnished. We then entered the location and the server was identified by Det. Gatto and Agent Chrissomallis. Agent Chrissomallis advised Miss Pope that she had furnished alcohol to an underage police cadet. Miss Pope was advised that a copy of these events will be forwarded to the Baltimore City Liquor Board. The alcoholic drink was left with the night manager. All events occurred in Baltimore City Maryland.

Continued

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

|   |                     |                    |               |
|---|---------------------|--------------------|---------------|
| 22 Reporting Officer Name (PRINT CLEARLY)<br>Gatto, A | Sequence No<br>1115 | Assignment<br>VICE | Signature<br> |
|---|---------------------|--------------------|---------------|

|   |                     |                    |               |
|---|---------------------|--------------------|---------------|
| 23 Approving Supervisor Rank and Name<br>Sgt. Leisher | Sequence No<br>G307 | Assignment<br>VICE | Signature<br> |
|---|---------------------|--------------------|---------------|

|                        |             |      |      |             |                |
|------------------------|-------------|------|------|-------------|----------------|
| 24 RMS Data Entered By | Sequence No | Date | Time | 25 Reviewer | 26 Referred To |
|------------------------|-------------|------|------|-------------|----------------|



EXHIBIT

tabbles

#2

Back

### Board of Liquor License Commissioners

For Baltimore City  
1 North Charles Street, 15th Floor  
Baltimore, Maryland, 21201

## INVESTIGATION REPORT

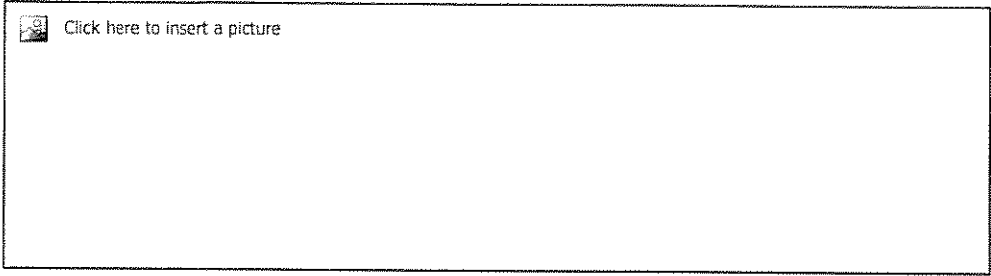
|  |                                 |            |  |
|--|---------------------------------|------------|--|
| Location Address:                      | 1401 BLOOMFIELD AVENUE 21227    |            |  |
| Licensee Information (Trade Name):     | LOAFERS 2                       |            |  |
| Corporation Name                       | TDF CORPORATION                 |            |  |
| License Type:                          | Class "B" Beer, Wine and Liquor |            |  |
| Owner Email:                           |                                 |            |  |
| Contact:                               |                                 |            |  |
| Bouncer/Security Name (if applicable): |                                 | D.O.B.     |  |
| Incident Date/Time:                    | 9/20/2018                       | 1:16:36 PM |  |

**Report Facts:**

On or about 8/7/2018 at approx. 11:45pm I Agent Chrissomallis while on duty and working with the Underage Task Force with members from the BCPD Vice Unit Det. Gatto and working in an undercover capacity Cadet Harris who was under the age of 21 during this investigation where conducting underage investigations in the City of Baltimore. We arrived at 1401 Bloomfield Ave in the City of Baltimore and the State of Maryland. Once at the location Cadet Harris entered the establishment known as Loafers went to the bar and asked the server later identified as one Nikita Pope for a Corona. Mrs. Pope furnished the Cadet with the beer. Cadet Harris notified the members of the task force via text that he had been served. We entered the establishment and identified Mrs. Pope. Det. Gatto and myself explained to Mrs. Pope that she had served an underage Police Cadet. Mrs. Pope was apologetic and very cooperative. We explained the process and left the location without any further incident.

Disregard dates and times in the heading of this report. Actual dates and times are in the body of the report.

Photos Taken:



Attach Additional Photos

*Report Prepared By:*

| Inspector(s)  | Submission Date                        |
|---|--|
| <input type="text" value="i:\0#w\baltimore\john.chrissomalliss"/> | <input type="text" value="9/20/2018"/> |
| <input type="button" value="Submit"/>                             |  |



## Liquor Board System

Version 1.0

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

### License Detail

#### License Info

License Num: **LB 256**      Cert Num: **0942**      Fee: **\$1,800.00**      Status: **Renewed**  
 License Date: 5/1/2018      License Year: 2018  
 CR Number: 12475751  
 Payment Date: 05-11-18

2017 - 2018 TPP Paid   
 2018 Trader's License

[Click to Start License Renewal](#)

9/19/18  


---

 CORP ✓  
 T.L ✓  
 [Signature]

#### Add Adult Entertainment License

#### Location

Corp Name: **TDF CORPORATION**  
 Trade Name: **LOAFERS 2**  
 Zone Code: 5  
 Phone: 410-525-2225

Block Num: 1401      Street: **BLOOMFIELD AVENUE**  
 City: **BALTIMORE**      State: **MD**      Zip: **21227**

CR Number: 12475751

Portion of Business Used:  
 FIRST FLOOR FOR BUSINESS

Restriction:

#### License Owners

| First Name | Last Name  | Street              | City        | State | Zip   | Action                              | Change Owner                                |
|------------|------------|---------------------|-------------|-------|-------|-------------------------------------|---|
| NICKOLAOS  | HAPSIS     | 1209 TRILLIUM COURT | BELCAMP     | MD    | 21017 | <input type="button" value="Edit"/> | <input type="button" value="Remove Owner"/> |
| EMMANUEL   | KARELAS    | 427 NEWKIRK STREET  | BALTIMORE   | MD    | 21224 | <input type="button" value="Edit"/> | <input type="button" value="Remove Owner"/> |
| DIMITRI    | VENGALAKOS | 3 FOX KNOLL COURT   | LUTHERVILLE | MD    | 21093 | <input type="button" value="Edit"/> | <input type="button" value="Remove Owner"/> |

**Comments**

| Date       | Comment  | Action |
|------------|--|--------|
| 05/10/2018 | ****RELEASED STATE OF MD TAX HOLD****.... /sb  | Delete |
| 03/06/2018 | Copy of 2017 Renewal Application - Invoice # 109672, (\$5)   | Delete |
| 03/01/2018 | Mailed letter of recognition for underage drinking compliance check on 2/15/2018 /kk   | Delete |
| 01/30/2018 | ****STATE OF MD TAX HOLD, letter sent to Licensee on January 30, 2018.****/mb  | Delete |
| 05/09/2017 | 4/13/2017-Public Hearing Violation of Rule 4.14 (a) Live Entertainment without Authorization (\$250) & Violation of Rule 4.14 (a) Live Entertainment without Authorization (\$250) - GUILTY \$500 fine + \$125 admin fee \$625 Total Fine (3-0 vote) | Delete |
| 05/01/2017 | PAID \$625.00 for Hearing Dated April 13, 2017; Invoice #107517... /sb   | Delete |
| 06/26/2015 | Paid \$375.00 for Hearing date 05/28/15, Invoice #99135.... /sb  | Delete |
| 05/29/2015 | 05/28/15 Hearing date: Violation of Rule 4.01(a) Minors – January 15, 2015... Fine \$250.00 + \$125.00 Admin Fee = \$375.00. 1 week to pay.  | Delete |
| 11/04/2010 | 10/8/10 \$100 CONF.FEE PAID IN FULL #75070   | Delete |
| 09/17/2010 | 9/10 Transfer of ownership & request to add live entertainment, off-premise catering & outdoor table service, B-BWL restaurant license, Emmanuel Karelas, Dimitri Vegalagos, Nick Hapsis, TDF Corporation  | Delete |

Print History (Print Card)

License num: LB 256  
Trade Name: LOAFERS 2

Address: 1401 BLOOMFIELD AVENUE

Comment:

Add Comment

**Hold Info**

Powered by:



⊕ Maryland Business Express

🏠 Home    🔒 Log In / Create Account

**TDF CORPORATION: D10529774**

**General Information**

Filing History

Annual Report/Personal Property

**General Information**

**Department ID Number:**

D10529774

**Business Name:**

TDF CORPORATION

**Principal Office:**

1401 BLOOMFIELD AVENUE  
BALTIMORE MD 21227

**Resident Agent:**

DAVID M. SILBINGER, ESQ.  
110 E. LEXINGTON ST., STE.100  
BALTIMORE MD 21202

**Status:**

INCORPORATED

**Good Standing:**

THIS BUSINESS IS IN GOOD  
STANDING

» [Order Certificate of Status](#)

**Business Type:**

CORPORATION

**Business Code:**

03-ORDINARY-BUSINESS-STOCK

**Date of Formation/ Registration:**

03/22/2005

**State of Formation:**

MD

**Stock Status:**

STOCK

**Close Status:**

YES

October 11, 2018

**Licensee(s):** Dominic Lascola  
O'Donnell/Curley, LLC, T/a El Bufalo  
2921 O'Donnell Street 21224

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

**Violation of Rule 4.01(a) Sales to Minors – August 7, 2018** – At approximately 9:45 PM the Baltimore City Police Department and the BLLC conducted random, joint investigations of establishments to determine if licensees would sell alcoholic beverages to minors. The joint task force responded to the establishment and sent Baltimore City Police Cadet Cecil Harris, who is under the age of 21, into the establishment to attempt to purchase an alcoholic beverage(s). At that time, Harris entered the establishment and requested a bottle of "Corona" beer from the bartender, Ms. Chelsea Johnson. Upon Harris' request, Ms. Johnson furnished him a beer by opening a bottle of "Corona" beer, placing it in front of Harris, and walking away. Harris then communicated to the task force that he was furnished an alcoholic beverage(s). Members of the task force entered the establishment and notified Ms. Johnson that an alcoholic beverage was furnished to a minor and it would be reported to the BLLC.

(a) **Service on Licensee(s):** Summons issued to the licensee(s) on 9/25/2018.

(b) **Witness Summoned:** Summons issued to Inspector John Chrissomallis on 9/25/2018. Summons issued to Baltimore City Police Dept.: Sgt. Leisher, Det. Gatto, and Cadet Harris on 9/25/2018.

(c) **Violation History of Current Corporation:** The current corporation has no history of violations.

(d) **License Transfer Date:** The license transferred to the above named corporation on 4/9/2015.

**Board's Decision:**

State of Maryland

Board of Liquor License Commissioners

for Baltimore City  
1 N. Charles Street, Suite 1500  
Baltimore, Maryland, 21201-3724  
Phone: (410) 396-4377

**NOTICE**

To: O'Donnell/Curley, LLC  
T/A El Bufalo  
2921 O'Donnell Street

Date: September 24, 2018

**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 11th day of October 2018, 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 the Alcoholic Beverages Article, as amended, should not be suspended or revoked as required by this Board by Section 4-604 of said Article, following your conviction and/or violation of said law, to wit:

**Location of Incident:** T/A El Bufalo, 2921 O'Donnell Street, Baltimore, MD ("the establishment").

**Violation of Rule 4.01(a) Sales to Minors – August 7, 2018** – At approximately 9:45 PM the Baltimore City Police Department and the BLLC conducted random, joint investigations of establishments to determine if licensees would sell alcoholic beverages to minors. The joint task force responded to the establishment and sent Baltimore City Police Cadet Cecil Harris, who is under the age of 21, into the establishment to attempt to purchase an alcoholic beverage(s). At that time, Harris entered the establishment and requested a bottle of "Corona" beer from the bartender, Ms. Chelsea Johnson. Upon Harris' request, Ms. Johnson furnished him a beer by opening a bottle of "Corona" beer, placing it in front of Harris, and walking away. Harris then communicated to the task force that he was furnished an alcoholic beverage(s). Members of the task force entered the establishment and notified Ms. Johnson that an alcoholic beverage was furnished to a minor and it would be reported to the BLLC.

**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 the Alcoholic Beverages Article of the Annotated Code of Maryland for reference purposes. If you have any questions or concerns regarding this matter please contact Deputy Executive Secretary, Thomas R. Akras at 410-396-4377.**

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

**Albert Matricciani, Jr., Chairman**

BOARD OF LIQUOR LICENSE  
COMMISSIONERS  
FOR BALTIMORE CITY

INCIDENT REPORT

Form 8

1150-25-56  
Revised 12/17

POLICE DEPARTMENT  
BALTIMORE, MARYLAND

Person  Property  Vehicle  Miscellaneous

Domestic Related  Gang Related  Juvenile Related  Hate Crime  Investigative Stop

|  |                                   |   |
|--|-----------------------------------|---|
| 1 Crime / Incident<br>Liquor Board Violation   | Attempt <input type="checkbox"/>  | 2 Complaint Number<br>2-180803133   |
| 3 Location of Offense / Incident (Exact Street Address)<br>2921 O'Donnell St               |                                   | Page 1 of 2   |
| 4 Date / Time Occurred<br>6/7/2018 @ 2145 hrs  | 5 Date / Time Reported<br>same #4 |   |
| 11 Location Given by Dispatcher<br>on view   |                                   | 12 Companion Report No  |
| 13 Case Status<br><input type="checkbox"/> Open <input checked="" type="checkbox"/> Closed |                                   | 14 Case Disposition<br><input checked="" type="checkbox"/> Cleared <input type="checkbox"/> Not Cleared |
| 15 Follow-up<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No        | 16 Crime Code                     | 17 Crime Classification   |
| 18 Describe Location of Offense or Type of Premise<br>city bar                             |                                   | 19 Reported by Crime Watcher<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No     |

|   |                             |   |               |   |  |   |  |
|---|-----------------------------|---|---------------|---|--|---|--|
| 6 Unit<br>4844  | 7 Post of Occurrence<br>232 | 8 Reporting Area  | 9 Street Code | 10 CAD Number<br>2872   | 11 Location Given by Dispatcher<br>on view |   | 12 Companion Report No   |
| 20 Complainant / Victim<br>Name (Last, First, MI) or Firm Name # Business<br>Galto, A   |                             | Residence / Address (Include City, County, State, Zip)<br>601 E. Fayette St   |               |   | Age  | DOB   | Height Weight Gender<br><input checked="" type="checkbox"/> M <input type="checkbox"/> F |
| Race: <input type="checkbox"/> Black <input type="checkbox"/> Asian or Pacific Islander Native <input type="checkbox"/> Other |                             | Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Unknown <input type="checkbox"/> Not Hispanic or Latino |               | Limited English Proficient? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No     |  | If yes, Primary Language  |  |
| Where Employed or School Attending (include City, Location)<br>bpd  |                             | Occupation  |               | Hours of Employment Residence Phone   |  | Other Phone   |  |
| 21 Injuries and Location on Body  |                             | Victim's Condition  |               | Victim Hospitalized Facility<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  | 22 Victim / Assailant Relationship  |  |
|   |                             |   |               |   |  | 23 Current / Former Cohabitant<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  |

|   |     |      |     |     |  |  |                 |             |
|---|-----|------|-----|-----|--|--|-----------------|-------------|
| 24 Reporting Person<br>Name (Last, First, MI)<br>Same #20 | Sex | Race | Age | DOB | Address (include City, County, State, Zip) |  | Residence Phone | Other Phone |
|---|-----|------|-----|-----|--|--|-----------------|-------------|

|   |                        |  |  |  |                 |             |
|---|------------------------|--|--|--|-----------------|-------------|
| 25 Witness Parent/Guardian<br><input type="checkbox"/> <input type="checkbox"/> | Name (Last, First, MI) | Address (include City, County, State, Zip) |  |  | Residence Phone | Other Phone |
|---|------------------------|--|--|--|-----------------|-------------|

|  |  |   |  |   |      |                          |        |   |
|--|--|---|--|---|------|--------------------------|--------|---|
| 26 Suspect<br>Name (Last, First, MI)<br>Johnson, Chelsea   | Address (include City, County, State, Zip) |   |  | Age   | DOB  | Height                   | Weight | Gender<br><input type="checkbox"/> M <input checked="" type="checkbox"/> F  |
| Race: <input type="checkbox"/> Black <input type="checkbox"/> Asian or Pacific Islander <input type="checkbox"/> Other |  | Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Unknown <input type="checkbox"/> Not Hispanic or Latino |  | Limited English Proficient? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |      | If yes, Primary Language |        | How did officer proceed? <input type="checkbox"/> Lang Line <input type="checkbox"/> Professional Interpreter <input type="checkbox"/> Qualified Bilingual Member |
| Complexion   |  | Hair Color/Length/Style   |  | Height  | 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 Escape |
| 32 Weapon / Means of Attack                         | 33 Method Used to Commit Crime | 34 Type of Property Taken | 35 Total Loss Value |                        |

|  |            |  |  |  |  |  |  |  |  |
|--|------------|--|--|--|--|--|--|--|--|
| 36 Vehicle Information<br><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   | Mileage  |  |  |
| Vehicle Identification Number (VIN)  |            | Ignition Locked  | Keys In Ignition   | Doors Locked   | Windows Closed   | Radio In Car   | Battery In Car   | Spare Tire In Car  | Trunk Locked   |
|  |            | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <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<br><input type="checkbox"/> Yes <input type="checkbox"/> No | 42 Tow List Check<br><input type="checkbox"/> Yes <input type="checkbox"/> No | 43 Owner Notified<br><input type="checkbox"/> Yes <input type="checkbox"/> No |
|-----------------|--------------------|--------------------------------------|--|---|---|


|                    |                     |                   |          |                              |
|--------------------|---------------------|-------------------|----------|------------------------------|
| 44 Tow Information | Location Towed From | Location Towed To | Towed by | Tow Truck Operator Signature |
|--------------------|---------------------|-------------------|----------|------------------------------|


|                       |                         |                  |      |                              |      |      |
|-----------------------|-------------------------|------------------|------|------------------------------|------|------|
| 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 |
|------------------------------|-------------|------|-----------------------------|------|

|  |   |   |
|--|---|---|
| 49 Communications Supervisor Notified<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | 50 Citywide Broadcast Time<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | 51 Victim Assistance/Incident Information/Explanation Form(s) Provided<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|--|---|---|

|                        |
|------------------------|
| 52 Copies Forwarded To |
|------------------------|

|  |  |
|--|--|
| Conf'd Sections  | Narrative: (1) Continuation of any preceding items, (2) Property Listing, to include property bar and seized/suspected evidence/property list, (3) Describe details of incident, include all steps taken in preliminary investigation, (4) List all addresses/notifications, including name, agency or assignment, unit number, telephone numbers and charges. |
| O'Donnell/Curly LLC<br>El Buffalo<br>2921 O'Donnell St<br>Balto, Md 21224<br>Dominic Lascola |  |
|          |  |
| Continued <input type="checkbox"/>   |  |

|   |                                     |  |
|---|-------------------------------------|--|
| 53 Reporting Officer Name (PRINT CLEARLY)<br>GATO A | Sequence No./Assignment<br>145 VICE | Signature<br> |
|---|-------------------------------------|--|

|  |                                      |  |
|--|--------------------------------------|--|
| 54 Approving Supervisor Rank and Name<br>Sgt. Wicker | Sequence No./Assignment<br>6307 VICE | Signature<br> |
|--|--------------------------------------|--|

|                        |                   |      |             |                |
|------------------------|-------------------|------|-------------|----------------|
| 55 RMS Data Entered By | Sequence No./Date | Time | 56 Reviewer | 57 Referred To |
|------------------------|-------------------|------|-------------|----------------|

REPORT SHOULD BE TYPED OR LEGIBLY PRINTED IN BLACK INK



POLICE DEPARTMENT  
BALTIMORE, MARYLAND

|  |                             |  |                                   |
|--|-----------------------------|--|-----------------------------------|
| 1 Crime / Incident<br>Liquor Board Violation   |                             | Attempt <input type="checkbox"/>   | 2 Complaint Number<br>2-180803133 |
| 3 Location of Offense / Incident (Street Address, Zip)<br>2921 O'Donnell St  |                             |  | Page 2 of 2                       |
| 4 Date / Time of This Report<br>8/7/2018 @ 2145 hrs  |                             | 5 Arrest / Custody Number  |                                   |
| 6 Unit<br>4844   | 7 Post of Occurrence<br>232 | 8 Reporting Area   | 9 Street Code                     |
| 10 CAD Number<br>2872  |                             | 11 Original Report Date / Time<br>same #4  |                                   |
| 12 Offense / Incident Changed From   |                             |  |                                   |
| 13 Case Status<br><input type="checkbox"/> Open <input checked="" type="checkbox"/> Closed   |                             | 14 Multiple Clearance<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No           |                                   |
| 15 Case Disposition<br><input checked="" type="checkbox"/> Cleared <input type="checkbox"/> Not Cleared  |                             | 16 Follow-up<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                    |                                   |
| 17 Crime Code  |                             | 18 Crime Classification  |                                   |
| 19 Complainant / Victim<br>Name (Last, First, MI), or Firm Name if Business<br>Gatto, A  |                             | Residence / Address (Include City, County, State, Zip)<br>. 601 E. Fayette St                          |                                   |
| Sex  |                             | Age DOB  |                                   |
| Race<br><input type="checkbox"/> Black <input checked="" type="checkbox"/> White <input type="checkbox"/> Asian or Pacific Islander <input type="checkbox"/> Native American/Alaskan Native <input type="checkbox"/> Other |                             | Gender<br><input type="checkbox"/> Male <input type="checkbox"/> Female                                |                                   |
| Ethnicity  |                             | Hispanic or Latino<br><input type="checkbox"/> Not Hispanic or Latino <input type="checkbox"/> Unknown |                                   |
| 20 Copies Forwarded To   |                             |  |                                   |

Cont'd Sections: (1) Continuation of any preceding form. (2) Property Listing, to include property taken and seized/submitted evidence/property; (3) Record all activity and all developments in case subsequent to last report, include name 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.

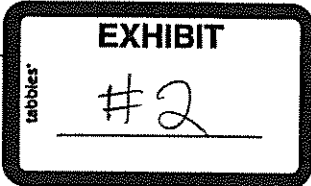
On 8/7/2018 at approx 2145hrs. Members of the BPD Vice Unit and Baltimore City Liquor Board were utilizing BPD Cadet Harris who is under the legal drinking age of 21. Cadet Harris was given a \$20 dollar bill which was marked by a photograph prior to any investigations. At this time we sent Cadet Harris into 2921 O'Donnell St, which is known as El Buffalo. Once inside, Cadet Harris sat down at the bar and met with the server who was later identified as Chelsea E. Johnson of [REDACTED]. Cadet Harris asked server Johnson for a draft Corona. At this time server Johnson furnished Cadet Harris a glass of Draft Corona. At this time Cadet Harris notified your writer and other members of the unit of the alcohol furnished. We then entered the location and the server was identified by Det. Gatto and Agent Chrissomallis. Agent Chrissomallis advised Miss Johnson that she had furnished alcohol to an underage police cadet. Miss Johnson was advised that a copy of these events will be forwarded to the Baltimore City Liquor Board. The alcoholic drink was left with the night manager. All events occurred in Baltimore City Maryland.

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)<br>Gatto, A                                   |  | Sequence No<br>1115          | Assignment<br>VICE | Signature |
| 23 Approving Supervisor Rank and Name<br>Sgt. Leisher                                   |  | Sequence No<br>G307          | Assignment<br>VICE | Signature |
| 24 RMS Data Entered By  |  | Sequence No                  | Date               | Time      |
| 25 Reviewer   |  | 26 Referred To               |                    |           |

REPORT SHOULD BE TYPED OR LEGIBLY PRINTED IN BLACK INK

Back



### Board of Liquor License Commissioners

For Baltimore City  
1 North Charles Street, 15th Floor  
Baltimore, Maryland, 21201

## INVESTIGATION REPORT

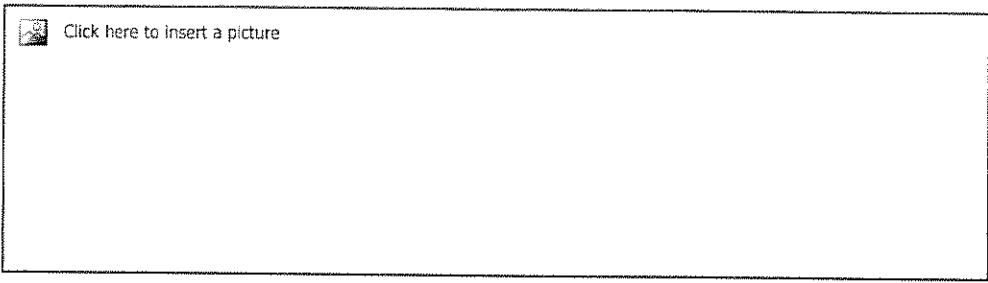
|  |                                   |            |  |
|--|-----------------------------------|------------|--|
| Location Address:                      | 2921 O'DONNELL STREET 21224       |            |  |
| Licensee Information (Trade Name):     | EL BUFALO                         |            |  |
| Corporation Name                       | O'DONNELL/CURLEY, LLC             |            |  |
| License Type:                          | Class "BD7" Beer, Wine and Liquor |            |  |
| Owner Email:                           |                                   |            |  |
| Contact:                               |                                   |            |  |
| Bouncer/Security Name (if applicable): |                                   | D.O.B.     |  |
| Incident Date/Time:                    | 9/20/2018                         | 2:04:15 PM |  |

**Report Facts:**

on or about 8/7/2018 at approx. 11:45pm | Agent Chrissomallis while on duty and working with the Underage Task Force with members from the BPD Vice Unit Det. Gatto and BPD Cadet Harris who was under the age of 21 at the time of this investigation conducted investigations throughout the city. We arrived at 2921 O'Donnell Street in the city of Baltimore and the State of Maryland. Once at the location Cadet Harris entered the establishment and sat at the bar. At that time he ordered a Corona beer from the server later identified as Chelsea E. Johnson. Mrs. Johnson furnished the Cadet with the beer at which time Cadet Harris notified the members of the team via Text. We entered the location and identified the server. We explained to Mrs. Johnson that she had just served and underage police cadet and we explained the violation and the process. We left the location without any incident.

Disregard dates and times in the heading of this report. Actual dates and times are in the body of the report.

Photos Taken:



Attach Additional Photos

*Report Prepared By:*

| Inspector(s)                         | Submission Date |
|--------------------------------------|-----------------|
| i:\0#w\baltimore\john.chrissomalliss | 9/20/2018       |

Submit



## Liquor Board System

Version 1.0

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

### License Detail

#### License Info

License Num: **LBD7 291**      Cert Num: **0926**      Fee: **\$1,820.00**      Status: **Renewed**  
 License Date: 5/1/2018      License Year: 2018  
 CR Number: 15799647  
 Payment Date: 04-30-18

2017 - 2018 TPP Paid   
 2018 Trader's License

[View to Start License Renewal](#)

9/20/18  


---

 CORP ✓  
 T.L ✓  
 TOB

#### Add Adult Entertainment License

#### Location

Corp Name: **O'DONNELL/CURLEY, LLC**  
 Trade Name: **EL BUFALO**  
 Zone Code: 12  
 Phone: 410-342-0999

Block Num: 2921      Street: **O'DONNELL STREET**  
 City: **BALTIMORE**      State: **MD**      Zip: **21224**

CR Number: 15799647

#### Portion of Business Used:

USE THE ENTIRE PREMISES AS A TAVERN/RESTAURANT 1ST AND 2ND FLOORS WITH LIVE ENTERTAINMENT PER BMZA 2015-380 APPROVED 02/23/16. LICENSEE MAY PROVIDE OFF-  
 PREMISES CATERING OF FOOD AND ALCOHOL.

Restrictions:

#### License Owners

| First Name | Last Name | Street                     | City      | State | Zip   | Action                              | Change Owner                                |
|------------|-----------|----------------------------|-----------|-------|-------|-------------------------------------|---|
| DOMINIC    | LASCOLA   | 3700 TOONE STREET APT 1420 | Baltimore | MD    | 21224 | <input type="button" value="Edit"/> | <input type="button" value="Remove Owner"/> |

#### Comments

| Date | Comment | Action |
|------|---------|--------|
|      |         |        |

|            |   |        |
|------------|---|--------|
| 07/19/2018 | Requested for Outdoor Extension for Friday, July 20, 2018. Permit #ROW2018-SE1018661; Invoice #113055... /sb  | Delete |
| 06/14/2018 | Requested for Outdoor Extension for Friday, June 15, 2018. Permit #ROW2018-SE1018661; Invoice #112812... /sb  | Delete |
| 05/11/2018 | Mailed letter of recognition for underage drinking compliance check on 4/18/2018 /kk  | Delete |
| 04/30/2018 | *****RELEASED STATE OF MD TAX HOLD***** ..... /sb   | Delete |
| 04/03/2018 | FOOD FORM WAS SUBMITTED WITH 2018-2019 RENEWAL APPLICATION..... /sb   | Delete |
| 12/28/2017 | Received a letter that showed Personal Property Tax Owed to City of Baltimore was cleared on 12/22/17...mb  | Delete |
| 11/27/2017 | Received letter regarding modifications to the MOU from the President of the Canton Community Association in reference to changes on the live entertainment portion of their license. See parent file for letter /kk  | Delete |
| 10/02/2017 | ***PERSONAL PROPERTY TAX OWED TO CITY OF BALTIMORE, letter sent to Licensee on October 2, 2017.*** /mb  | Delete |
| 07/29/2016 | 07/15/16 - Paid \$100.00 for Hearing Dated July 14, 2016. Invoice # 103827... /sb   | Delete |
| 07/28/2016 | 7/14/2016 - Public Hearing re: Request to add live entertainment and off premise catering. APPROVED (2-1 vote) Moore is an abstention.  | Delete |
| 03/13/2015 | Sales tax hold 11/25/2014 has been release 03/11/2015   | Delete |
| 02/09/2015 | 11/25/2014 (RE: 10328286) Maryland Sales& Use tax sales hold  | Delete |
| 02/02/2015 | State of MD Tax Hold, letter sent to merchant on January 23, 2015.  | Delete |
| 12/23/2014 | 12/18/14 Public Hearing re Application to transfer ownership. APPROVED (3-0 vote)   | Delete |
| 11/21/2014 | 11/20/2014 Public Hearing re: Violation of Rule 4.18. Charges DISSMISSED  | Delete |
| 04/12/2012 | 3/22/2012 Public Hearing re: Request to reopen. APPROVED.   | Delete |
| 10/19/2010 | 10/14/10 Public Hearing re: Violation of Art.2B,Sec.10-301(j)(1) and rule 4.18.DECISION: ART.2B,SEC.10-301(j)(1)GUILTY LICENSEE SUSPENDED FOR 30 DAYS-SUSPEND-LICENSEE HAS 30 DAYS TO ABATE VIOLATION OR SUSPENSION WILL GO INTO EFFECT AND RULE 4.18 GUILTY \$200 SUSPENDED ALL.ADM.FEE MUST BE PAID \$125 | Delete |

Print History (Print Card)

License num: LBD7 291  
Trade Name: EL BUFALO

Address: 2921 O'DONNELL STREET

Comment:

Add Comment

**Hold Info**

Powered by:



🏠 Maryland Business Express

🏠 Home

👤 Log In / Create Account

**O'DONNELL/CURLY, LLC: W16188260**

**General Information**

Filing History

Annual Report/Personal Property

**General Information**

**Department ID Number:**

W16188260

**Business Name:**

O'DONNELL/CURLY, LLC

**Principal Office:**

SUITE C 300  
1212 YORK RD  
LUTHERVILLE MD 21093

**Resident Agent:**

BARRY WEISKOPF  
26TH FLOOR  
100 EAST PRATT ST  
BALTIMORE MD 21202

**Status:**

ACTIVE

**Good Standing:**

THIS BUSINESS IS IN GOOD  
STANDING

» **Order Certificate of Status**

**Business Type:**

DOMESTIC LLC

**Business Code:**

20 ENTITIES OTHER THAN  
CORPORATIONS

**Date of Formation/ Registration:**

11/17/2014

**State of Formation:**

MD

**Stock Status:**

N/A

**Close Status:**

N/A