Office of the CITY CLERK CITY OF MARGATE 5790 Margate Boulevard Margate, Florida 33063 (954) 972-6454

## APPLICATION FOR SPECIAL PERMIT FOR EXTENDED HOURS

## ALCOHOL SALES FOR CONSUMPTION ON PREMISE

	Please check one of the following: New Application Renewal Application
1.	CORPORATE NAME: My Street Holdings Inc PHONE: \$\frac{1}{954} \frac{461-0324}{954}
2.	NAME OF BUSINESS ORGANIZATION: TQLA Station (Name which the business operates under/fictitious name/DBA)
3.	ADDRESS: 5190 Coconit Creek Parkway Margate FL 33063  No. and Street State Zip
4.	APPLICANT'S NAME: Margarita C. Prenteria PHONE:
	HOME ADDRESS: No. and Street City State Zip
5.	APPLICANT'S DATE OF BIRTH:
6.	BUSINESS ENTITY: Sole Proprietorship () *Partnership () * Corporation () *Limited Liability Corporation (LLC) ()*If form of business is partnership or corporation the reverse side of this form must be completed. If the reverse side is not completed your from will be returned to you.
7.	TYPE OF LIQUOR LICENSE: 4COP - BEV 1600076
<b>8</b> .	DATE: 9-13-17 APPLICANT'S SIGNATURE:
9.	RETURN APPLICATION WITH \$150 FILING FEE TO: City Clerk's Office City Of Margate 5790 Margate Boulevard Margate, FL 33063
10.	STATE BEVERAGE LICENSE NUMBER_BEV1600076

NOTE: If establishment is sole proprietorship there is no need to complete this side of the form. However, if the establishment is a partnership or corporation, list all proprietors, partners or officers. If establishment is owned by a Corporation, list the names of the officers and all individuals who own 5% or more of the assets of the Corporation owning the establishment. If a Corporation is publicly held, only the officers and directors need to be listed, as well as the Florida Registered Agent. NAME: Margarito C. Renteria \_\_\_\_\_ TITLE: President HOME ADDRESS: PHONE: DATE OF BIRTH: (This line must be completed in order to process your request. If left blank, your form will be returned to you.) NAME: Elemi Benteria **HOME ADDRESS:** DATE OF BIRTH: (This line must be completed in order to process your request. If left blank, your form will be returned to you.) NAME: Maria C. Renteria \_TITLE:\_\_\_\_C.F.O\_ **HOME ADDRESS:** PHONE: DATE OF BIRTH: (This line must be completed in order to process your request. If left blank, your form will be returned to you.) If additional space is needed to list, please attach a separate sheet listing the names, addresses, titles, phone numbers and dates of birth and place a check mark on this line. Also attach a copy the corporate listing from the Division of Corporations website, http://www.sunbiz.org. If any of the listed individuals have been convicted of a felony crime within the last five (5) years, please list the name of the individual, the state where the felony took place and the law enforcement agency involved. OFFICE USE ONLY POLICE DEPARTMENT REVIEW: Recommend Approval Recommend Review by City Commission **Recommend Rejection** Comments: In Show - Ading Chief Date: 09/27/17



## MARGATE POLICE DEPARTMENT

## SPECIAL PERMIT FOR EXTENDED HOURS ALCOHOLIC BEVERAGE SALES INDICES CHECK

**Business Name: TQLA Station** Owner's Name: My Street Holdings Inc. Address: 5190 - 5210 Coconut Creek Pkwy Phone #: 561-927-8341 1. Has the licensee, at the licensed premises, within three (3) years been arrested or charged with violating any of the laws of the State of Florida or any other state, relating to the following: That said arrest/charge relates to the conduct of the licensee's present business? If yes, explain: N/A 2. Has the licensee, at the licensed premises, within three (3) years been convicted of violating any of the laws of the State of Florida or any other state, relating to the following: That said conviction relates to the conduct of the licensee's present business? Yes If yes, explain: N/A Have any of the licensee's employees, at the licensed premises, within three (3) years been convicted of violating any of the laws of the State of Florida or any other state, relating to the following: That said conviction relates to the conduct of the licensee's present business? If yes, explain: N/A 4. Margate Police Records check of the amount and degree of law enforcement activity being generated by the establishment both inside and outside the location for the period of 6/1/2017to present. (The annual period for renewals or modified period for conditional renewals). 2 Total number of calls for service 0 Number of violations, crimes and type (Attach police reports or other documentation) 0 Number of alcohol / tobacco violations (Attach police reports or other documentation) Does the business have a permitted alarm? Yes Does the business have any unpaid alarm fees or fines? | Yes \$0 Total amount of unpaid alarm fees or fines (Attach documentation, if applicable) Does the business have a current City of Margate occupational license? Does the business have a current State of Florida alcoholic beverage license? X Yes Does the business have any open or historical code compliance issues? ⊠ No Explain: Address at 5203 Coconut Creek Pkwy has an open code violation for lighting, however, it stems from February 2017 (before the business was taken over by new owners on June 12, 2017. Background completed by