

20-07

State of Arizona  
Department of Liquor Licenses and Control

Created 08/07/2020 @ 10:57:56 AM

Local Governing Body Report

**LICENSE**

Number:		Type:	012 RESTAURANT
Name:	TRES ISLAS MARISCOS Y TACOS		
State:	Pending		
Issue Date:		Expiration Date:	
Original Issue Date:			
Location:	11411 S FORTUNA ROAD #204 YUMA, AZ 85367 USA		
Mailing Address:	1917 W 17TH PLACE YUMA, AZ 85364 USA		
Phone:	(928)276-9677		
Alt. Phone:	(213)399-1647		
Email:	TRESISLASMYT@GMAIL.COM		

**AGENT**

Name:	MILDRED DEJESUS CASILLAS
Gender:	Female
Correspondence Address:	1917 W 17TH PLACE YUMA, AZ 85364 USA
Phone:	(213)399-1647
Alt. Phone:	
Email:	TRESISLASMYT@GMAIL.COM

**OWNER**

Name:	TRES ISLAS MARISCOS Y TACOS LLC	
Contact Name:	MILDRED DEJESUS CASILLAS	
Type:	LIMITED LIABILITY COMPANY	
AZ CC File Number:	23111182	State of Incorporation: AZ
Incorporation Date:	07/27/2020	
Correspondence Address:	1917 W 17TH PLACE YUMA, AZ 85364 USA	
Phone:	(213)399-1647	
Alt. Phone:		
Email:	TRESISLASMYT@GMAIL.COM	

Officers / Stockholders



Name:  
MILDRED DEJESUS CASILLAS  
HECTOR MANUEL CASILLAS

Title:  
Manager LLC  
Manager LLC

% Interest:  
51.00  
49.00

**TRES ISLAS MARISCOS Y TACOS LLC - Manager  
LLC**

Name: MILDRED DEJESUS CASILLAS  
Gender: Female  
Correspondence Address: 1917 W 17TH PLACE  
YUMA, AZ 85364  
USA  
Phone: (213)399-1647  
Alt. Phone:  
Email: TRESISLASMYT@GMAIL.COM

**TRES ISLAS MARISCOS Y TACOS LLC - Manager  
LLC**

Name: HECTOR MANUEL CASILLAS  
Gender: Male  
Correspondence Address: 1917 W 17TH PLACE  
YUMA, AZ 85364  
USA  
Phone: (928)210-0261  
Alt. Phone:  
Email: TRESISLASMYT@GMAIL.COM

**MANAGERS**

Name: MILDRED DEJESUS CASILLAS  
Gender: Female  
Correspondence Address: 1917 W 17TH PLACE  
YUMA, AZ 85364  
USA  
Phone: (213)399-1647  
Alt. Phone:  
Email: TRESISLASMYT@GMAIL.COM

\*\*\*\*\*

Name: HECTOR MANUEL CASILLAS  
Gender: Male  
Correspondence Address: 1917 W 17TH PLACE  
YUMA, AZ 85364  
USA  
Phone: (928)210-0261  
Alt. Phone:  
Email: TRESISLASMYT@GMAIL.COM

## APPLICATION INFORMATION

Application Number: 115154  
Application Type: New Application  
Created Date: ~~07/25/2020~~ 8-7-2020 Abby

## QUESTIONS & ANSWERS

### 012 Restaurant

- 1) Are you applying for an Interim Permit (INP)?  
No
- 2) Are you one of the following? Please indicate below.  
Property Tenant  
Subtenant  
Property Owner  
Property Purchaser  
Property Management Company  
Property Tenant
- 3) Is there a penalty if lease is not fulfilled?  
Yes  
What is the penalty?  
balance of rent on the 2 year lease
- 4) Is the Business located within the incorporated limits of the city or town of which it is located?  
No  
If no, in what City, Town, County or Tribal/Indian Community is this business located?  
Yuma, AZ
- 5) What is the total money borrowed for the business not including the lease?  
Please list each amount owed to lenders/individuals.  
\$100,000
- 6) Is there a drive through window on the premises?  
No
- 7) If there is a patio please indicate contiguous or non-contiguous within 30 feet.  
n/a
- 8) Is your licensed premises now closed due to construction, renovation or redesign or rebuild?  
Yes  
If yes, what is your estimated completion date?  
August 30, 2020

### 12G Restaurant Growler

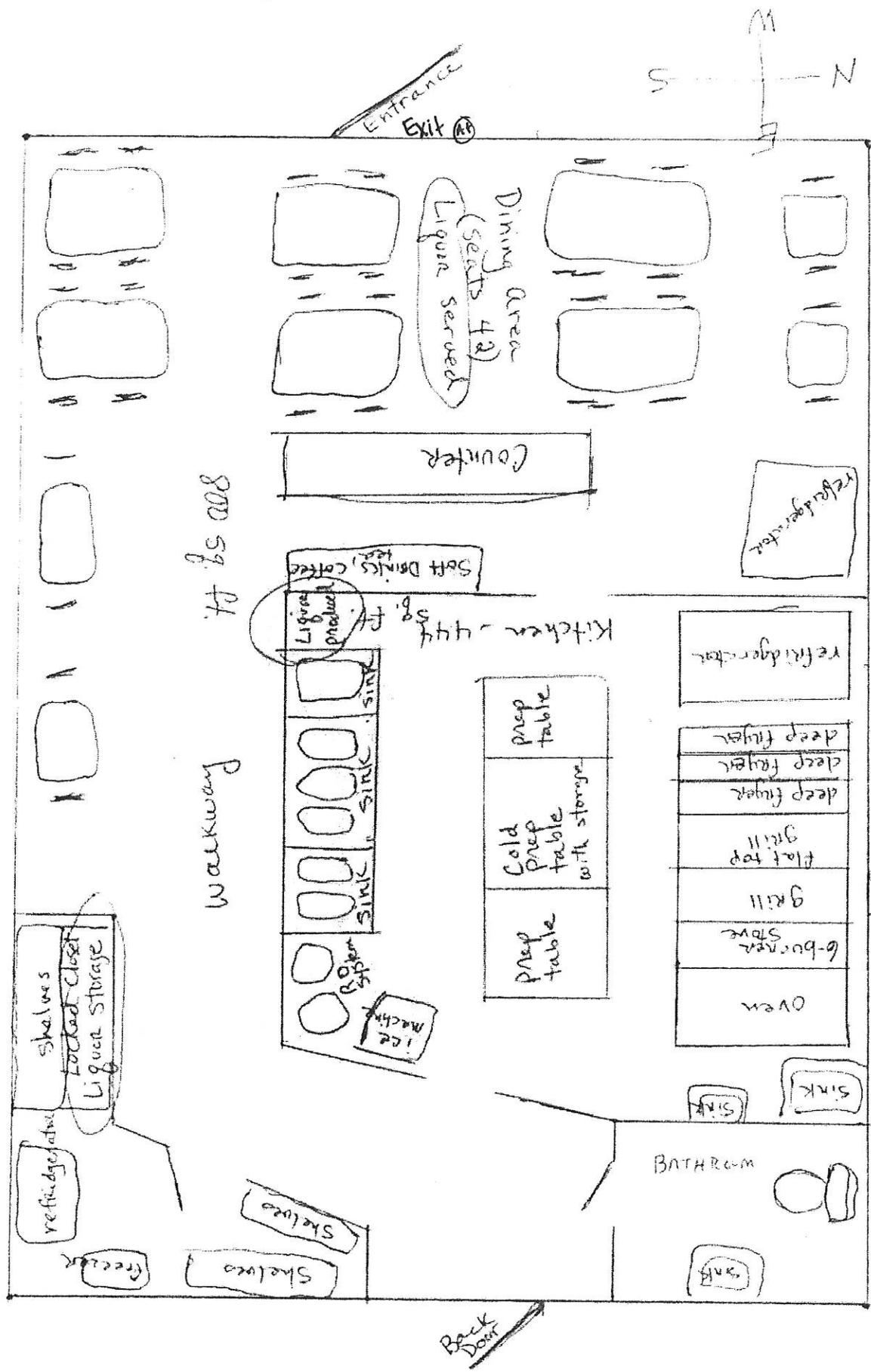
- 1) Have you uploaded a Growler application?  
To obtain a Growler application copy and paste this link into your browser:  
[http://www.azliquor.gov/forms/lic\\_12GrowlerApplication.pdf](http://www.azliquor.gov/forms/lic_12GrowlerApplication.pdf)  
Yes
- 2) Provide name, address, and distance of nearest school and church.  
(If less than one (1) mile note footage)  
Sunrise Elementary School, 9943 E 28th St., Yuma, AZ 85367, Distance 85367
- 3) Please provide name, address, and distance of nearest church.  
St. John Neumann, 11545 E 40th St., Yuma, AZ 85367

## DOCUMENTS

DOCUMENT TYPE	FILE NAME	UPLOADED DATE
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DIAGRAM/FLOOR PLAN	TresIslasMYT_Diagram_08012020.jpg	08/02/2020
MENU	TresIslasMYT_Menu_08012020.docx	08/02/2020
RESTAURANT OPERATION PLAN	TresIslasMYT_InventoryList_08012020.docx	08/02/2020
GROWLER APPLICATION	GrowlerApplication_08032020.jpg	08/03/2020
QUESTIONNAIRE	Questionnaire_MDC_08032020.pdf	08/03/2020
QUESTIONNAIRE	Questionnaire_HMC_08032020.pdf	08/03/2020
RECORDS REQUIRED FOR AUDIT	RequiredRecordsforAudit_08032020.pdf	08/03/2020
	OperationPlan_08062020.pdf	08/06/2020
	HMC_Questionnaire_08062020.pdf	08/06/2020
	HMC_StatementofCitizenship_08062020.pdf	08/06/2020
	HMC_AZLicense_08062020.jpg	08/06/2020
	MDC_Questionnaire_08062020.pdf	08/06/2020
	MDC_AZ_DriverLicense_08062020.pdf	08/06/2020
	HMC_BasicTrainingCertificate_06202020.pdf	08/06/2020
	HMC_ManagementTrainingCertificate_06202020.pdf	08/06/2020
	MDC_BasicTrainingCertificate_06_15_2020.pdf	08/06/2020
	MDC_ManagementTrainingCertificate_06152020.pdf	08/06/2020
	Menu_08062020.docx	08/06/2020
	MDC_StatementofCitizenship_08062020.pdf	08/06/2020
	GrowlerApplication_08062020.pdf	08/06/2020

Tres Islas Mariscos y Tacos (1,244 sq feet)  
 11411 S Fortuna Rd, Ste ~~B104~~ <sup>204</sup> Yuma, AZ 85367



800 sq. ft.  
 Panorama

20 AUG 7 11:47 AM 4 24



Arizona Department of Liquor Licenses and Control  
 800 W Washington 5th Floor  
 Phoenix, AZ, 85007-2934  
 www.azliquor.gov  
 (602) 542-5141

DLLC USE ONLY  
 Job # 115154

**RESTAURANT OPERATION PLAN**

- Name of restaurant (Please print): Tres Islas Mariscos y Tacos, LLC
- List equipment below by Make, Model, and Capacity: (PROVIDE THE FOLLOWING ITEMS ONLY, NO ATTACHMENTS)

Grill	Wolf C36S-36GTN
Oven	Hobart HGC20
Freezer	Magic Chef HMC F7W2
Refrigerator (2)	Atosa MBF80V56R + Avantco A-49R-HC
Sink (2)	NSF 2 compartments + 3 compartments <small>model #s not visible</small>
Dish Washing Facilities	NSF 1 compartment with pressure faucet <small>model # not visible</small>
Food Preparation Counter (Dimensions)	Avantco APPT-71-HC 71" x 37 1/2" x 42"
Other	

- Attach a copy of your full menu including prices (examples: Breakfast, Lunch, Dinner, and Nonalcoholic beverages).
- List the seating capacity for:

- Restaurant dining area of your premises: (Do not include patio seating) [ 42 ]
- Bar area of your premises: [ + N/A ]
- Total dining and bar seating capacity of your premises: [ = 42 ]

5. What Type of dinnerware and utensils are utilized within your restaurant?

Reusable       Disposable       Both

6. Does your restaurant have a bar area that is distinct and separate from the dining area?  YES  No

(If yes, what percentage of the public floor space does this area cover?) \_\_\_\_\_ %

7. What percentage of your public premises is used primarily for restaurant dining?

(Do not include kitchen, bar, hi-top tables, or game area.) 100 %

\*20 AUG 7 11:41 AM '14

8. Does your restaurant contain any games, televisions, or any other entertainment?  YES  No  
 (If yes, specify what types and how many (examples: 4-TV's, 2-Pool Tables, 1-Video Game, etc.)

The restaurant will have three (3) TVs where we will have on Sports Channels or Music Videos.

9. Do you have live entertainment or dancing?  YES  NO  
 (If yes, what type and how often 8.5  
 example: DJ-2 x a week, Karaoke-2 x a month, Live Band-1 x a month, etc.)

10. Use space below to list how many employees for each position to fully staff your business.

Position	How many
Cooks	2
Bartenders	1
Hostesses	1
Managers	2
Servers	2
Other ( Dishwasher)	1
Other ( )	
Other ( )	

I, Mildred D. Casillas, hereby declare that I am the APPLICANT filing this application. I have read this application and the contents and all statements true, correct and complete.

x Mildred D. Casillas  
 (SIGNATURE OF APPLICANT)

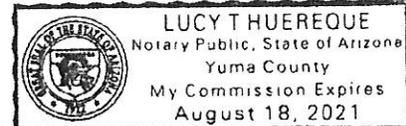
**NOTARY**

State of AZ County of Yuma

The foregoing instrument was acknowledged before me this 10<sup>th</sup> day of August 2020  
 Day Month Year

My Commission Expires on: 08/18/2021 Date

[Signature]  
 Signature of Notary Public





Arizona Department of Liquor Licenses and  
Control  
800 W Washington 5th Floor  
Phoenix, AZ 85007-2934  
[www.azliquor.gov](http://www.azliquor.gov)  
(602) 542-5141

**RECORDS REQUIRED FOR AUDIT**  
Applies to Series 11 (Hotel/Motel W/Restaurant) & Series 12 (Restaurant) Only

**MAKE A COPY OF THIS DOCUMENT AND KEEP IT WITH YOUR DLLC RECORDS**

In the event of an audit, you will be asked to provide to the Department any documents necessary to determine compliance with A.R.S. §4-205.02(G). Such documents requested may include however, are not limited to:

1. All invoices and receipts for the purchase of food and spirituous liquor for the licensed premises.
2. A list of *all* food and liquor vendors
3. The restaurant menu used during the audit period
4. A price list for alcoholic beverages during the audit period
5. Mark-up figures on food and alcoholic products during the audit period
6. A recent, *accurate* inventory of food and liquor (taken within two weeks of the Audit Interview Appointment)
7. Monthly Inventory Figures - beginning and ending figures for food and liquor
8. Chart of accounts (copy)
9. Financial Statements-Income Statements-Balance Sheets
10. General Ledger
  - A. Sales Journals/Monthly Sales Schedules
    - 1) Daily sales Reports (to include the name of each waitress/waiter, bartender, etc. with sales for that day)
    - 2) Daily Cash Register Tapes - Journal Tapes and Z-tapes
    - 3) Dated Guest Checks
    - 4) Coupons/Specials/Discounts
    - 5) Any other evidence to support income from food and liquor sales
  - B. Cash Receipts/Disbursement Journals
    - 1) Daily Bank Deposit Slips
    - 2) Bank Statements and canceled checks
11. Tax Records
  - A. Transaction Privilege Sales, Use and Severance Tax Return (copies)
  - B. Income Tax Return - city, state and federal (copies)
  - C. Any supporting books, records, schedules or documents used in preparation of tax returns
12. Payroll Records
  - A. Copies of all reports required by the State and Federal Government
  - B. Employee Log (A.R.S. §4-119)
  - C. Employee time cards (actual document used to sign in and out each work day)
  - D. Payroll records for all employees showing hours worked each week and hourly wages

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13. Off-site Catering Records (must be complete and separate from restaurant records)

- A. All documents which support the income derived from the sale of food off the license premises.
- B. All documents which support purchases made for food to be sold off the licensed premises.
- C. All coupons/specials/discounts

The sophistication of record keeping varies from establishment to establishment. Regardless of each licensee's accounting methods, the amount of gross revenue derived from the sale of food and liquor must be substantially documented.

**REVOCATION OF YOUR LIQUOR LICENSE MAY OCCUR IF YOU FAIL TO COMPLY WITH A.R.S. §4-210(A)7 AND A.R.S. §4-205.02(G).**

**A.R.S. §4-210(A)7**

The licensee fails to keep for two years and make available to the department upon reasonable request all invoices, records, bills or other papers and documents relating to the purchase, sale and delivery of spirituous liquors and, in the case of a restaurant or hotel-motel licensee, all invoices, records, bills or other papers and documents relating to the purchase, sale and delivery of food.

**A.R.S. §4-205.02(G)**

For the purpose of this section:

- 1. "Restaurant" means an establishment which derives **at least forty percent (40%)** of its gross revenue from the sale of food
- 2. "Gross revenue" means the revenue derived from all sales of food and spirituous liquor on the licensed premises, regardless of whether the sales of spirituous liquor are made under a restaurant license issued pursuant to this section or under any other license that has been issued for the premises pursuant to this article.

**NOTARY**

I, (Print Full Name) Mildred D. Casillas, have read and understand all aspects of this statement

X (Signature) *Mildred D. Casillas*  
Controlling Person / Agent

State of Arizona County of Yuma  
the foregoing instrument was acknowledged before me this

03 of Aug 2020  
Day Month Year

My commission expires on: 10/07/2023



JANET SANDOVAL  
Notary Public, State of Arizona  
Yuma County  
Commission # 571104  
My Commission Expires  
October 07, 2023

*Janet Sandoval*  
Signature of NOTARY PUBLIC

**MAKE A COPY OF THIS DOCUMENT AND KEEP IT WITH RECORDS REQUIRED BY THE STATE**

20-07



Arizona Department of Liquor Licenses and Control
800 W Washington 5th Floor
Phoenix, AZ 85007-2934
www.azliquor.gov
(602) 542-5141

QUESTIONNAIRE
A.R.S. §4-202, 4-210
Type or Print with Black Ink

804-910

The fees allowed by R19-1-102 will be charged for all dishonored checks.

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

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

QUESTIONNAIRE IS TO BE COMPLETED BY EACH CONTROLLING PERSON, AGENT AND MANAGER BEING DISCLOSED TO THE DEPARTMENT. EACH PERSON COMPLETING THIS FORM MUST SUBMIT A BLUE OR BLACK LINED FINGERPRINT CARD ALONG WITH A \$22 FEE. FINGERPRINTS MUST BE DONE BY A LAW ENFORCEMENT AGENCY OR BONA FIDE FINGERPRINT SERVICE. FOR AN ADDITIONAL \$13 FEE, FINGERPRINTS MAY BE DONE AT THE DEPARTMENT OF LIQUOR WHEN ACCOMPANIED BY A COMPLETED APPLICATION.

Liquor License#: 115154

1. Check the Appropriate Box

Form with checkboxes for Controlling Person, Agent, and Premises Manager. Controlling Person and Agent are checked.

2. Name: Casillas Mildred Dejesus Birth Date: [Redacted]

3. Social Security #: [Redacted] Driver License #: [Redacted] State: AZ

4. Place of birth: New York, NY USA Height: 5'5 Weight: 163 Eyes: Bro Hair: Bro

5. Name of current/most recent spouse: Casillas Hector Manuel Birth Date: [Redacted]

6. Are you a bona fide resident of Arizona? Yes No If yes, what is your date of residency: [Redacted]

7. Daytime telephone number: 213-399-147 E-mail address: mildreddejesus@hotmail.com

8. Business Name: Tres Islas Mariscos y Tacos Business Phone: 928, 276, 9677

9. Business Location Address: 11411 S Fortuna Rd, Ste 204 Yuma, AZ, Yuma 85367

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

Table with 4 columns: FROM Month/Year, TO Month/Year, DESCRIBE POSITION OR BUSINESS, EMPLOYERS NAME OR NAME OF BUSINESS (Street Address, City, State & Zip). Rows include unemployment and Sales Manager at L.A. Care Health Plan.

(ATTACH ADDITIONAL SHEET IF NECESSARY)



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

FROM Month/Year	TO Month/Year	RESIDENTIAL Street Address
3/27/2020	CURRENT	1917 W 17 <sup>th</sup> Place Yuma, AZ 85364
6/30/2017	3/27/2020	2224 S Vermont Ave #102, Torrance, CA 90502
2/01/2012	6/30/2017	23805 Arlington Ave, #19, Torrance, CA 90503

(ATTACH ADDITIONAL SHEET IF NECESSARY)

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

**If you answered "YES" to any Question 14 through 18 YOU MUST attach a signed statement.  
Give complete details including dates, agencies involved and dispositions.  
CHANGES TO QUESTIONS 14-18 MAY NOT BE ACCEPTED**

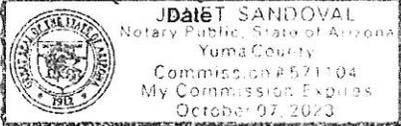
**NOTARY**

I (Print Full Name) Mildred D. Casillas hereby declare that I am the Agent/ Controlling Person / Premises Manager filing this application. I have read this document and verify the contents and all statements are true, correct and complete, to the best of my knowledge.

Signature: Mildred D. Casillas State of Arizona County of Yuma

The foregoing instrument was acknowledged before me this 03 Day of Aug, 2020

My Commission Expires on: 10/07/2023



**Janet SANDOVAL**  
Notary Public, State of Arizona  
Yuma County  
Commission #571104  
My Commission Expires  
October 07, 2023

Day Month Year

Janet Sandoval  
Signature of Notary

The Licensee has authorized the person named on this questionnaire to act as manager for the above license.

PRINT NAME: Mildred D. Casillas SIGNATURE: Mildred D. Casillas



State of Arizona  
Department of Liquor Licenses and Control  
800 W. Washington 5<sup>th</sup> Floor  
Phoenix, AZ 85007  
(602) 542-5141

**ARIZONA STATEMENT OF CITIZENSHIP  
OR ALIEN STATUS FOR STATE PUBLIC BENEFITS**

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

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

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

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

**SECTION I – APPLICANT INFORMATION**

INDIVIDUAL OWNER/AGENT NAME (Print or type) Mildred DeJesus Casillas

**SECTION II – CITIZENSHIP OR NATIONAL STATUS DECLARATION**

Are you a citizen or national of the United States?  Yes  No

If Yes, indicate place of birth:

City New York State (or equivalent) NY Country or territory USA

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

2) Name of document: AZ Driver license  
Go to Section IV.

If you answered No, you must complete Section III and IV.

2015 7 13 11:16 AM 4 24

### SECTION III – ALIEN STATUS DECLARATION

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

\_\_\_\_\_  
Name of document provided

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

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

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

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

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

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

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

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

#### **Otherwise Lawfully Present**

- 14. A person not described in categories 1-13 who is otherwise lawfully present in the United States.

**PLEASE NOTE: The federal Personal Responsibility and Work Opportunity Reconciliation Act may make persons who fall into this category ineligible for licensure. See 8 U.S.C. § 1621(a).**

SECTION IV - DECLARATION

All applicants must complete this section.

I declare under penalty of perjury under the laws of the state of Arizona that the answers and evidence I have given are true and correct to the best of my knowledge.

Mildred DeJesus Casillas

Individual Owner/Agent Printed Name

Mildred D. Casillas

Individual Owner/Agent Signature

8/6/2020

Today's Date

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

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

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

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

Motor Vehicle Division

### Be Prepared. Carry additional Identification.

This receipt may not be accepted when solely presented to organizations, businesses, or government agencies to establish identity, age, or address. The decision to accept this document will be made independently by the reviewing entity. It is strongly encouraged to carry additional forms to identification (e.g. Birth Certificate, Social Security Card, etc.) to present, along with this receipt.

**Save time. Go online!**  
**azmvdnow.az.gov**

- Get a replacement driver license
- Renew your vehicle registration
- Update your address
- Start your driver license application and more

Contact the Motor Vehicle Division  
**Online:** azdot.gov/MVD  
**Phone:** 602.225.0072  
**Hearing/Speech Impaired TDD:** 800.324.5425



Let us know how we did today!  
 Complete a quick survey  
 azdot.gov /MVD/CustomerSurvey

**Issued:** 07/30/2020

**Expires:** 07/30/2028

Your permanent credential will be mailed to: 1917 W 17th Pl Yuma, AZ 85364

It is a violation of Arizona Revised Statute 13-2002 to alter, forge or counterfeit this document. Any violation of ARS 13-2002 is a Class 4 Felony.

AUG 7 10:41 AM '20

You must report a change of address within 10 days

CLASS D - Operator

ENDORSEMENTS:  
NONE

RESTRICTIONS:  
B - Corrective lenses

MEDICAL ALERT:  
NONE

14683550



Arizona

DRIVER LICENSE

USA



CLASS D  
 END NONE  
 REST B  
 DeJesus Casillas  
 Mildred  
 1917 W 17th Pl  
 Yuma, AZ 85364

DL# [REDACTED]  
 DOB [REDACTED]

EXP 07/30/2028 ISS 07/30/2020  
 SEX F EYES BRO  
 HGT 5' 5" HAIR BRO  
 WGT 163

*Mildred DeJesus Casillas*



Arizona Department of Liquor Licenses and Control  
 800 W Washington 5<sup>th</sup> Floor  
 Phoenix, AZ 85007-2934  
 www.azliquor.gov  
 (602) 542-5141

**QUESTIONNAIRE**  
 A.R.S. §4-202, 4-210  
 Type or Print with Black Ink

804-910

The fees allowed by R19-1-102 will be charged for all dishonored checks.

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

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

QUESTIONNAIRE IS TO BE COMPLETED BY EACH CONTROLLING PERSON, AGENT AND MANAGER BEING DISCLOSED TO THE DEPARTMENT. EACH PERSON COMPLETING THIS FORM MUST SUBMIT A BLUE OR BLACK LINED FINGERPRINT CARD ALONG WITH A \$22 FEE. FINGERPRINTS MUST BE DONE BY A LAW ENFORCEMENT AGENCY OR BONA FIDE FINGERPRINT SERVICE. FOR AN ADDITIONAL \$13 FEE, FINGERPRINTS MAY BE DONE AT THE DEPARTMENT OF LIQUOR WHEN ACCOMPANIED BY A COMPLETED APPLICATION.

Liquor License#: 115154

1. Check the Appropriate Box →

<input checked="" type="checkbox"/> Controlling Person	<input type="checkbox"/> Agent	<input type="checkbox"/> Premises Manager (complete all questions except #12)
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2. Name: Casillas Hector Manuel Birth Date: [REDACTED]  
Last First Middle (NOT a public record)

3. Social Security #: [REDACTED] Driver License #: [REDACTED] State: AZ

4. Place of birth: Yuma, AZ USA Height: 5'5 Weight: 200 Eyes: BRO Hair: BRO  
City State COUNTRY (not county)

5. Name of current/most recent spouse: Casillas Mildred Defesus Birth Date: [REDACTED]  
Last First Middle (NOT a public record)

6. Are you a bona fide resident of Arizona?  Yes  No If yes, what is your date of residency: 1988

7. Daytime telephone number: 928-210-0261 E-mail address: casillasclan63@icloud.com

8. Business Name: Tres Islas Mariscos y Tacos Business Phone: 928, 276 9677

9. Business Location Address: 11411 S Fortuna Rd Ste 204, Yuma, AZ Yuma 85367  
Street (do not use PO Box) City State County Zip

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

FROM Month/Year	TO Month/Year	DESCRIBE POSITION OR BUSINESS	EMPLOYERS NAME OR NAME OF BUSINESS (Street Address, City, State & Zip)
2/2004	CURRENT	Heavy Equipment Operator	EMC Services, Bldg 404, YPG, Yuma, AZ 85364

(ATTACH ADDITIONAL SHEET IF NECESSARY)

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

FROM Month/Year	TO Month/Year	RESIDENTIAL Street Address
7/1/2017	CURRENT	1917 W 17 <sup>th</sup> Pl, Yuma, AZ 85364
1/2007	7/1/2017	2619 S 46 <sup>th</sup> Dr., Yuma, AZ 85364

(ATTACH ADDITIONAL SHEET IF NECESSARY)

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

If you answered "YES" to any Question 14 through 18 YOU MUST attach a signed statement.  
Give complete details including dates, agencies involved and dispositions.  
CHANGES TO QUESTIONS 14-18 MAY NOT BE ACCEPTED

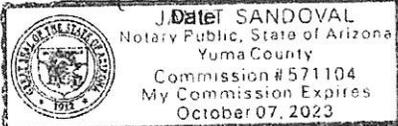
**NOTARY**

I (Print Full Name) Hector M Casillas hereby declare that I am the Agent/ Controlling Person / Premises Manager filing this application. I have read this document and verify the contents and all statements are true, correct and complete, to the best of my knowledge.

Signature: Hector Casillas State of Arizona County of Yuma

The foregoing instrument was acknowledged before me this 03 Day of Aug, 2020

My Commission Expires on: 10/07/2023



[Signature]  
Signature of Notary

The Licensee has authorized the person named on this questionnaire to act as manager for the above License.

PRINT NAME: Hector M. Casillas SIGNATURE: Hector M Casillas

**Tres Islas Mariscos Y Tacos**  
**Menu**

**Appetizers**

- Agua Chiles – fresh shrimp, cucumber slices, red onion, and chili peppers, drizzled with fresh key lime - **\$13.00**
- Quesadilla Sensilla (*just cheese*) – **\$2.29**
- Choice of meat – carne asada, pastor, carnitas, chicken - **\$3.49**
- Fried Calamari - **\$7.00**
- Fried Fish - **\$7.00**
- Fried Shrimp - **\$7.00**
- Fried Seafood Combo Platter – 2 grilled, 2 beer batter, 2 corn meal - **\$14.00**
- Cucumber, Shrimp, and Pork Strips platter - **\$12.00**
- Chips & Salsa – first serving complimentary, additional servings **\$4.00**

**Main Menu**

**Seafood Cocktails** – Small - **\$12.25**, Medium - **\$14.25**, Large - **\$16.25**  
- Shrimp, cucumber and red onion

**Tostadas de Ceviche** (ask for mayo on the tostada for added flavor)

- Shrimp - **\$4.75**
- Fish - **\$4.25**
- Seafood Ceviche (Shrimp, Fish, Octopus, Scallops) - **\$10.00**

Ceviche in a bowl (Good for 3)

Shrimp - **\$13.25**

Fish - **\$11.75**

Seafood Ceviche - **\$29.00**

**Street Tacos** – served on your choice of flour or corn tortillas

*All of our tacos are served with a blend of cabbage, fresh pico de gallo with cilantro, and drizzled with delicious Mexican crema, zesty avocado and creamy chipotle sauces; dress up with fresh lime and additional sauces– Enjoy!*

**Shrimp – \$3.75**

Grilled or freshly breaded with our homemade batter

**Carnitas – \$3.00**

pork seasoned with special house spices

**Calamari - \$3.50**

Grilled or freshly breaded with our homemade batter

**Fish - \$3.25**

Grilled or freshly breaded with our homemade batter

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## **Tres Islas Mariscos Y Tacos Menu**

### **Carne Asada – \$3.00**

char-grilled 100% Agnus Beef

### **Al Pastor – \$3.00**

marinated pork with fresh house chile blend and grilled pineapple

### **Chicharron - \$3.00**

deep fried pork rinds made in a blend of mild chile sauce

### **Chicken - \$3.00**

Char-grilled chicken seasoned with special house spices

### **Add-ons:**

- Avocado - **\$1.50**
- Octopus - **\$2.00**
- Scallops - **\$3.00**
- Calamari - **\$2.00**

### **Beverages & Alcoholic Drinks**

Jarritos Sodas - **\$2.00**

- Tamarindo, Mandarin, Mango

### **Aguas Frescas - \$3.00**

Horchata, Tamarindo, Jamaica (Hibiscus), Fresh Cucumber with Watermelon

### **Fountain Drinks – free refills**

Pepsi, Diet Pepsi, Crush, Mist, MUG Root Beer, Dr. Pepper - **\$2.75**

**Coffee - \$2.25**

### **Alcoholic Beverages**

Margaritas – House - **\$7.50**

Beer – Imported - **\$4.00**

Beer – Domestic - b

Wine – Red Blend, Merlot, Pinot Noir, Chardonnay, Rosé - **\$5.50**

Mimosa – **\$5.75**

Bloody Mary - **\$7.75**

### **Dessert**

- Tres Leches Cake with whipped cream and a scoop of ice cream - **\$4.50**

- Vanilla/Strawberry ice cream with whipped cream and drizzle of caramel syrup - **\$2.25**