

Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Why is this form needed?

This transfer license application form is required for all individuals or entities seeking to apply for the transfer of ownership and/or location of an existing liquor license. Applicants should review **Title 04** of **Alaska Statutes** and **Chapter 304** of the **Alaska Administrative Code**. All fields of this form must be completed, per AS 04.11.260, AS 04.11.280, AS 04.11.290, and 3 AAC 304.105.

This form must be completed and submitted to AMCO's Anchorage office, along with all other required forms and documents, before any license application will be considered complete.

Section 1 – Transferor Information

Enter information for the *current* licensee and licensed establishment.

Licensee:	AK, Inc.		License #:	License #:		
License Type:	Package Store		Statutory Reference:		AS04.09.230	
Doing Business As:	Speedway Express					
Premises Address:	545 Muldoon Road					
City:	Anchorage	State:	AK	ZIP:	99504	
Local Governing Body:	Municipality of Anchorage	Э	·/·			

Transfer Type:



Regular transfer (Transfer of location)

Transfer with security interest

MAY 0 8 2021 ALCOHOL MARUDANA CONTROL OFFICE

Involuntary retransfer

OFFICE USE ONLY				
Complete Date:	Transaction #:	100804641		
Board Meeting Date:	License Years:			
Issue Date:	Examiner:			



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Section 2 – Transferee Information

Enter information for the *new* applicant and/or location seeking to be licensed.

Licensee:	AK, Inc.					
Doing Business As:	Speedway Express					
Premises Address:	101 E. Northern Lig	nts Blvd.				
City:	Anchorage	State:	AK	ZIP:	99503	
Community Council:	Midtown Community	^v Council				

Mailing Address:	1450 N. Benson Avenue, Unit A					
City:	Upland	State:	CA	ZIP:	91786	

Designated Licensee:	Rawa Anabi		
Contact Phone:	907-717-5502	Business Phone:	909-394-4728
Contact Email:	sireifej@carenterpris	ses.net	

No If "Yes", write your six-month operating period:

Section 3 – Premises Information

Premises to be licensed is: an existing facility a new building a proposed building The next two questions must be completed by <u>beverage dispensary</u> (including tourism) and <u>package store</u> applicants only: What is the distance of the shortest pedestrian route from the public entrance of the building of your proposed premises to the outer boundaries of the nearest school grounds? Include the unit of measurement in your answer. 1,836 feet

What is the distance of the shortest pedestrian route from the public entrance of the building of your proposed premises to the public entrance of the nearest church building? Include the unit of measurement in your answer.

670 feet

Seasonal License?

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Yes



City:

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Section 4 – Sole Proprietor Ownership Information

This section must be completed by any sole proprietor who is applying for a license. Entities should skip to Section 5. If more space is needed, please attach a separate sheet with the required information. The following information must be completed for each licensee and each affiliate (spouse).

his individual is an: 🔲 applicant	affiliate	
Name:		
Address:		
City:	State:	ZIP:
his individual is an: 🔲 applicant	affiliate	
Name:		
Address:		1
City:	State:	ZIP:

Section 5 – Entity Ownership Information

State:

This section must be completed by any entity, including a corporation, limited liability company (LLC), partnership, or limited partnership, that is applying for a license. Sole proprietors should skip to Section 6.

If more space is needed, please attach a separate sheet with the required information.

- If the applicant is a corporation, the following information must be completed for each stockholder who owns 10% or more of the stock in the corporation, and for each president, vice-president, secretary, and managing officer.
- If the applicant is a limited liability organization, the following information must be completed for each member with an ownership interest of 10% or more, and for each manager.
- If the applicant is a partnership, including a limited partnership, the following information must be completed for each partner with an interest of 10% or more, and for each general partner.

Entity Official:	Rawa Anabi			
Title(s):	Director, Secretary	Phone:	909-394-4728	% Owned:
Address:	1450 N. Benson Avenu	ıe, Unit A		
City:	Upland	State:	CA	ZIP: 5 91786 VED
				MAY 0.8 2921



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Entity Official:	Sammer Anabi								
Title(s):	Director, President, Treasurer	Phone:	909-394-4728	% Owned:					
Address:	1450 N. Benson Avenue,	1450 N. Benson Avenue, Unit A							
City:	Upland	State:	CA	ZIP:	917	786			
Entity Official: Rawa Anabi as Trustee of the Sammer and Rawa Anabi Family Trust									
Title(s):	Shareholder	Phone:	909-394-4728	% Owned: 51					
Address:	1450 N. Benson Avenue,	Unit A							
City:	Upland	State:	CA	ZIP:	917	786			
Entity Official:	Sammer I. Anabi as Truste	e of the S	Sammer and Rawa	Anabi	Fam	nily Trust			
Title(s):	Shareholder	Phone:	909-394-4728	% Ow	ned:	49			
Address:	1450 N. Benson Avenue,	1450 N. Benson Avenue, Unit A							
City:	Upland	State:	CA	ZIP:	917	786			

This subsection must be completed by any applicant that is a corporation or LLC. Corporations and LLCs are required to be in good standing with the Alaska Division of Corporations (DOC) and have a registered agent who is an individual resident of the state of Alaska.

DOC Entity #:	10024884	AK Formed Date:	11/04/2014	Home State:	AK
Registered Agent:	Paracorp Incorporated		Agent's Phone:	800-533-7272	
Agent's Mailing Address:	PO Box 33735				
City:	Juneau	State:	AK	ZIP:	99803

Residency of Agent:

Yes No

Is your corporation or LLC's registered agent an individual resident of the state of Alaska?





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Section 6 – Other Licenses

Ownership and financial interest in other alcoholic beverage businesses:	
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Does any representative or owner named as a transferee in this application have any direct or indirect financial interest in any other alcoholic beverage business that does business in or is licensed in Alaska?

If "Yes", disclose which individual(s) has the financial interest, what the type of business is, and if licensed in Alaska, which license number(s) and license type(s):

AK, Inc., Rawa Anabi, Sammer Anabi Convenience Store Package Store License #4889; 3505; 4415; 2803; 2278; 2553; 2614; 741; 4054; 1329; 664; 1596; 1568; 3732; 3991; 416; 3465; 4565; 2546; 2227; 2512; 4216; 2225; 3262; 4544; 3909; 3894 (pending transfer)

Section 7 – Authorization

Communication with AMCO staff:

Does any person other than a licensee named in this application have authority to discuss this license with AMCO staff?

If "Yes", disclose the name of the individual and the reason for this authorization:

Summer Ireifej - Chief Administrative Officer - all corporate matters Amanda Anderson - Contract Manager - all corporate matters Chris Devellerez - Licensing & Compliance Manager - all corporate licensing/compliance matters Michael Schwarz - Local Counsel, Birch Horton Bittner & Cherot - all licensing matters



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No

Yes



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Section 8 – Transferor Certifications

Additional copies of this page may be attached, as needed, for the controlling interest of the current licensee to be represented.

I declare under penalty of perjury that the undersigned represents a controlling interest of the current licensee. I additionally certify that I, as the current licensee (either the sole proprietor or the controlling interest of the currently licensed entity) have examined this application, approve of the transfer of this license, and find the information on this application to be true, correct, and complete.

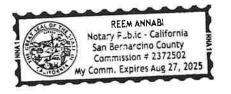
Rawa Anabi Signature of transferor RAWA ANABI

Printed name of transferor

Subscribed and sworn to before me this _____dday of ____

March Signature of Notary Public

Notary Public in and for the State of California My commission expires: August 27, 2025



Signature of transferor

Printed name of transferor

Subscribed and sworn to before me this _____ day of _____

, 20

Signature of Notary Public

Notary Public in and for the State of _____ My commission expires ILCOHOL MARLJUANA C Page 6 of 7



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Form AB-01: Transfer License Application

Section 8 – Transferor Certifications

Additional copies of this page may be attached, as needed, for the controlling interest of the current licensee to be represented.

I declare under penalty of perjury that the undersigned represents a controlling interest of the current licensee. I additionally certify that I, as the current licensee (either the sole proprietor or the controlling interest of the currently licensed entity) have examined this application, approve of the transfer of this license, and find the information on this application to be true, correct, and complete.

1 mmer

Signature of transferor

Sammer Anabi

Printed name of transferor

Subscribed and sworn to before me this 3rd day of October , 20 **24** .

Signature of Notary Public

REEM ANNABI Notary Public - California San Bernardino County Commission # 2372502 My Comm. Expires Aug 27, 2025

Notary Public in and for the State of California.

My commission expires: August 27, 2025

Signature of transferor

Printed name of transferor

Subscribed and sworn to before me this _____ day of _____ , 20

Signature of Notary Public

Notary Public in and for the State of

My commission expires:



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Section 9 – Transferee Certifications

Read each line below, and then sign your initials in the box to the right of each statement:

Initials

I certify that all proposed licensees (as defined in AS 04.11.260) and affiliates have been listed on this application.

I certify that all proposed licensees have been listed with the Division of Corporations.

I certify that I understand that providing a false statement on this form or any other form provided by AMCO is grounds for rejection or denial of this application or revocation of any license issued.

I certify that all licensees, agents, and employees who sell or serve alcoholic beverages or check the identification of a patron will complete an approved alcohol server education course, if required by AS 04.21.025, and, while selling or serving alcoholic beverages, will carry or have available to show a current course card or a photocopy of the card certifying completion of approved alcohol server education course, if required by 3 AAC 304.465.

I agree to provide all information required by the Alcoholic Beverage Control Board in support of this application.

I hereby certify that I am the person herein named and subscribing to this application and that I have read the complete application, and I know the full content thereof. I declare that all of the information contained herein, and evidence or other documents submitted are true and correct. I understand that any falsification or misrepresentation of any item or response in this application, or any attachment, or documents to support this application, is sufficient grounds for denying or revoking a license/permit. I further understand that it is a Class A misdemeanor under Alaska Statute 11.56.210 to falsify an application and commit the crime of unsworn falsification.





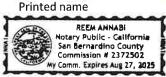
202

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Rawa ana

Signature of transferee

RAWA ANA



Signature of Notary Public Notary Public in and for the State of

STATE OF

My commission expires:

day of

ma

Subscribed and sworn to before me this



Alaska Alcoholic Beverage Control Board

Form AB-02: Premises Diagram

Why is this form needed?

A detailed diagram of the proposed licensed premises is required for all alcohol license applications, per AS 04.11.260, 3 AAC 305.630 and 3 AAC 305.660. Your diagram must include dimensions and must show all entrances and boundaries of the premises, walls, bars, fixtures, and areas of storage, service, consumption, and manufacturing.

This form must be completed and submitted to AMCO's Anchorage office before any license application will be considered complete. You may attach blueprints or other detailed drawings that meet the requirements of this form.

The diagram MUST include:

- You must use a solid, contiguous red line to outline the outer perimeter of your premises with no breaks or separations.
 - o The red outline is required to follow a physical barrier (wall, fence and even across doorways).
 - There should be <u>no red lines within the perimeter</u>
- Each area should be clearly labeled in any color other than red where alcohol is:
 - o Stored
 - Served/Sold
 - o Manufactured
 - o Consumed
- All diagrams must include:
 - o Dimensions (AMCO does not accept diagrams drawn to scale)
 - o Cross streets
 - o Points of reference, such as a compass rose indicating True North
 - o All entrances, exits, walls, bars, and fixtures
- If your premises include multiple floors, please include a separate diagram of each floor.
 - You must identify the stairs between each floor, and each hallway/corridor that leads to each set of stairs.
- If your premises includes multiple floors, please include a separate diagram of each floor. You must identify
 the stairs between each floor, and each hallway/corridor that leads to each set of stairs.
- If your proposed premises is located within a building or building complex that contains multiple businesses and/or tenants, please provide an additional page that clearly shows the location of your proposed premises within the building or building complex, along with the addresses and/or suite numbers of the other businesses and/or tenants within the building or building complex.
- Any license applications that include outdoor space are required to submit a security plan that includes information about the barriers, practices, and personnel that are to be used to ensure that alcohol is not introduced or removed from the permitted premises and to prevent the access of alcohol by a minor during the permitted event. A security plan may be requested for other proposed locations on a case-by-case basis.

Section 1 – Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	AK, Inc.	License Number:	1596
License Type:	Package Store		REALENS
Doing Business As:	Speedway Express		NUN SEUVIED
Premises Address:	101 E. Northern Lights Blvd.		PLAT 0.8 2023
City:	Anchorage	State: AK	ZIP: 0 99503 OFFICE



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Form AB-02: Premises Diagram

Section 2 – Detailed Premises Diagram

Clearly indicate the boundaries of the premises and the proposed licensed area within that property. See above for detailed instructions.

See attached.

