

# Pima County Clerk of the Board

Robin Brigode

Mary Jo Furphy  
Deputy Clerk

Administration Division  
130 W. Congress, 5<sup>th</sup> Floor  
Tucson, AZ 85701  
Phone: (520)724-8449 • Fax: (520) 222-0448

Document and Micrographics Mgt. Division  
1640 East Benson Highway  
Tucson, Arizona 85714  
Phone: (520) 351-8454 • Fax: (520) 351-8456

April 30, 2014

Mr. Hiam Ibrahim Innabi  
Super H  
4894 N. Louis River Way  
Tucson, AZ 85718

RE: Application for Agent Change/Acquisition of Control/Restructure  
License No.: 09100176  
Super H

Dear Mr. Innabi:

Notice is hereby given that the Pima County Board of Supervisors will hold a hearing in reference to the above application. Please be advised that the hearing has been scheduled for Tuesday, May 13, 2014, at 9:00 a.m. or thereafter, to be held at the following location:

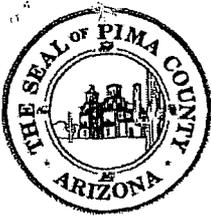
Pima County Administration Building  
Board of Supervisors Hearing Room  
130 West Congress, 1st Floor  
Tucson, Arizona 85701

If you have any questions pertaining to this hearing, please contact this office at (520)724-8449.

Sincerely,

A handwritten signature in cursive script that reads "Robin Brigode".

Robin Brigode  
Clerk of the Board



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TO: Pima County Sheriff's Department  
Investigative Support Unit

FROM: Brian Turco *BT*  
Administrative Support Specialist

DATE: April 3, 2014

RE: Sheriff's Report - Application for Agent Change/Acquisition of Control/  
Restructure

Attached is the application of:

Hiam Ibrahim Innabi  
d.b.a. Super H  
2170 W. Ruthrauff Road Tucson, AZ 85705

Pima County Liquor License No. 14-04-0050

SHERIFF'S REPORT

DATE: 04/29/14

Is there any reason this application should not be recommended for approval?

Nothing noted.

  
Investigative Support Unit Supervisor 1226

APR 30 14 PM 01:46 PCC CLK OF BD



# ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL

800 W Washington 5th Floor  
Phoenix AZ 85007-2934  
www.azliquor.gov  
(602) 542-5141

14-04-0050

## APPLICATION FOR AGENT CHANGE - ACQUISITION OF CONTROL - RESTRUCTURE

Check  
Appropriate  
Box

<input checked="" type="checkbox"/> <b>Agent Change</b> <small>Complete Sections 1,2,3,4,6 (See Note 1 on back)</small>	<input checked="" type="checkbox"/> <b>Acquisition of Control</b> <small>Complete Sections 1,2, (3,4 if changing Agent), 6</small>	<input type="checkbox"/> <b>Restructure</b> <small>Complete Sections 1,2,(3,4 if changing Agent), 5,6 (See Note 2 on back)</small>
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### SECTION 1 (COMPLETE THIS SECTION FOR AGENT CHANGE, ACQUISITION OF CONTROL OR RESTRUCTURE)

1. Name (INDIVIDUAL OR EXISTING AGENT (if no agent change) OR NEW AGENT OR CORPORATE OFFICER OR L.L.C. CONTROLLING MEMBER)

INNABI	MIAM	IBRAHIM	09100146
Last	First	Middle	Liquor License #

2.  Corporation  L.L.C.  N/A: SUNSHINE DEEM, INC. B10328 Corp. File #: 140831062  
(Exactly as it appears on Articles of Inc. or Articles of Org.)

3. Business Name: SUPER M

4. Business Address: 2710 W. RUTHAUFF RD. TULSON Pima 85705  
(Do not use P.O. Box Number) City COUNTY Zip

5. Is the business located within the incorporated limits of the above city or town?  Yes  No

6. Mailing Address: 4894 N. LOUIS RIVER WAY TULSON AZ 85718  
City State Zip

7. Business Phone: (520) 888-0653 Residence Phone: (520) 904-0467

8. Does this transaction involve the sale of any portion of the corporate stock?  YES  NO  N/A If yes, submit a certified copy of minutes.

9. Has there been any change of officers?  YES  NO  N/A If yes, submit a certified copy of minutes.

### SECTION 2 (COMPLETE THIS SECTION FOR AGENT CHANGE, ACQUISITION OF CONTROL OR RESTRUCTURE)

Each person listed in Section II must submit a personal questionnaire (Form LIC0101) and a Department approved fingerprint card which may be obtained at the Dept. A person appearing in both lists need only submit one questionnaire and fingerprint card.

1. List individual owner or partners or all directors, officers in corp., members in LLC:

Last	First	Middle	Title	Residence Address	City	State	Zip
INNABI	MIAM	IBRAHIM	PREY SEC TRUST.	4894 N. LOUIS RIVER WAY	Tulson	AZ	85718

(ATTACH ADDITIONAL SHEET(S) IF NECESSARY)

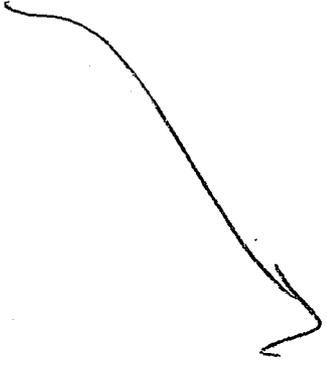
2. List stockholders or controlling members owning 10% or more of Corp/LLC:

Last	First	Middle	% Owned	Residence Address	City	State	Zip
THE MIAM I. INNABI	DEV. TRUST		100%	4894 N. LOUIS RIVER WAY	Tulson	AZ	85718

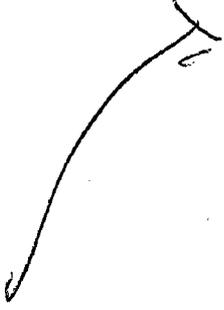
(ATTACH ADDITIONAL SHEET(S) IF NECESSARY)

Date Received	2-28-14
CSR	FD

SUNSHINE REEM, INC.



HIAM  
INNABI  
(PRES/SEZ/TREAS.)



THE HIAM I.  
INNABI REVOLVABLE  
TRUST  
(100%)



HIAM INNABI  
TRUST

14 MAR 28 11:47 AM '84

1. If the corporation/L.L.C. is owned by another entity, ATTACH AN OWNERSHIP AND DIRECTOR / OFFICER / MEMBER DISCLOSURE for the parent entity. Attach additional sheets as necessary in order to disclose real people.

As an Agent, will you be physically present and operating the licensed premises?  YES  NO

If you answered YES, you must provide proof of attendance of a Department approved Liquor Law Training Course within the last five years before your application for Agent can be submitted. If "no" a manager with approved training must be submitted.

SECTION 4 (COMPLETE THIS SECTION FOR AGENT CHANGE)

To be completed by the INDIVIDUAL OR EXISTING AGENT OR CORPORATE OFFICER OR L.L.C. CONTROLLING MEMBER:

1. License Number: 09100160 Date of last renewal: 10/31/2013

2. Current Licensee or Agent: BITAR FOUAD AYOUB (Exactly as it appears on license) Last First Middle

I, MIAM IBRAHIM IJWABI (Print full name), hereby consent to the agent appointment named herein and

agree to immediately assign a new agent in the event of the death, resignation, or discharge of this agent. I also understand that if the background report shows that I, the corporation, or any officer, director, member, or stockholder have been convicted of a felony in the past five (5) years, I will immediately surrender the license to the Arizona Department of Liquor Licenses and Control and hereby waive all rights to appeal such action.

State of ARIZONA County of PIMA

X (Signature of INDIVIDUAL / CORPORATE OFFICER / CLUB OFFICER / MEMBER)

The foregoing instrument was acknowledged before me this

24th day of March, 2014

Notary Public State of Arizona Pima County Kevin A Kramber My Commission Expires 06/05/2017

(Signature of NOTARY PUBLIC)

SECTION 5 (COMPLETE THIS SECTION FOR RESTRUCTURE)

Is there more than one licensed premises involved?  YES  NO If yes, SEPARATE APPLICATIONS must be filed and fees paid for each license/location.

Type of current ownership:

Type of new ownership:

- J.T.W.R.O.S.
 INDIVIDUAL
 PARTNERSHIP
 CORPORATION
 LIMITED LIABILITY CO.
 TRUST
 OTHER Explain

- J.T.W.R.O.S.
 INDIVIDUAL
 PARTNERSHIP
 CORPORATION
 LIMITED LIABILITY CO.
 TRUST
 OTHER Explain

SECTION 6 (COMPLETE THIS SECTION FOR AGENT CHANGE, ACQUISITION OF CONTROL OR RESTRUCTURE)

To be completed by INDIVIDUAL OR EXISTING AGENT (if no agent change) OR NEW AGENT OR CORPORATE OFFICER OR L.L.C. CONTROLLING MEMBER as listed in Question 1 Section 1:

I, MIAM IBRAHIM IJWABI, hereby declare that I am the APPLICANT filing this application.

have read the application and the contents and all statements are true, correct and complete.

State of ARIZONA County of PIMA

X (Signature of INDIVIDUAL OR AGENT)

The foregoing instrument was acknowledged before me this

24th day of March, 2014

My commission expires on: June 5, 2017

(Signature of NOTARY PUBLIC)

NOTE 1: The fee for an agent change MUST be submitted with this application: \$100.00 for the first application and \$50.00 for each additional application, not to exceed \$1,000.00. (A.R.S. 4-209.H)

NOTE 2: The \$100.00 fee for restructure/acquisition of control MUST be submitted with this application. (A.R.S. 4-209.A)

Notary Public State of Arizona Pima County Kevin A Kramber My Commission Expires 06/05/2017

14 APR 28 2014 DEPT PM 3 034