State of Arizona Department of Liquor Licenses and Control



Created 10/23/2025 @ 11:09:34 AM

Local Governing Body Report

LICENSE

Number:

Type:

Expiration Date:

010 BEER AND WINE

STORE

Name:

OASIS MINI MART

State:

Pending

Issue Date:

>

Original Issue Date:

Location:

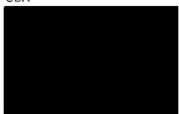
2201 MCCULLOCH BOULEVARD N

LAKE HAVASU CITY, AZ 86403

USA

Mailing Address:

Phone: Alt. Phone: Email:



AGENT

Name:

KENNETH K MEYERS JR

Gender:

Male

Correspondence Address:

Phone: Alt. Phone: Email:



OWNER

Name:

KABCL LLC

60th 12-22

Contact Name:

KENNETH MEYERS JR

Type:

LIMITED LIABILITY COMPANY

AZ CC File Number:

23861326

State of Incorporation: AZ

Incorporation Date:

1 Date. 08/02/202

Correspondence Address:

Phone:

Alt. Phone: Email:

Officers / Stockholders



Page 1 of 3

Name:

KENNETH K MEYERS JR

Title:

Manager-LLC

% Interest: 100.00

KABCL LLC - Manager-LLC

Name:

KENNETH K MEYERS JR

Gender:

Male

Correspondence Address:

Phone: Alt. Phone: Email:



MANAGERS

Name:

KENNETH K MEYERS JR

Gender:

Male

Correspondence Address:

Phone: Alt. Phone: Email:



APPLICATION INFORMATION

Application Number:

361984

Application Type:

New Application

Created Date:

09/24/2025



QUESTIONS & ANSWERS

010 Beer and Wine Store

Are you applying for an Interim Permit (INP)? 1)

What date are you taking ownership? Please upload the Interim Permit Notary page when you reach the upload page.

Taking ownership October 10, 2025

Provide name, address, and distance of nearest school.

(If less than one (1) mile note footage)

Smoketree Elementary School

2395 Smoketree Ave. .09 Miles

Are you one of the following? Please indicate below. 3)

Property Tenant

Subtenant

Property Owner

Property Purchaser

Property Management Company

Property Owner

4) Is there a penalty if lease is not fulfilled?

No

- 5) Is the Business located within the incorporated limits of the city or town of which it is located?
 Yes
- 6) What is the total money borrowed for the business not including the lease? Please list each amount owed to lenders/individuals.
- 7) Are there walk-up or drive-through windows on the premises?

Yes

8) Does the establishment have a patio?

No

9) Is your licensed premises now closed due to construction, renovation or redesign or rebuild? No

DOCUMENTS

DOCUMENT TYPE	FILE NAME	UPLOADED DATE
DIAGRAM/FLOOR PLAN	Square Footage.jpg	09/24/2025
QUESTIONNAIRE	_Personal_Info_Question.pdf	09/24/2025
ALIEN STATUS	Alien_Status.pdf	09/24/2025
ALIEN STATUS	Driver License.jpg	09/24/2025
INTERIM PERMIT NOTARY PAGE	Interim Permit.pdf	09/24/2025
	Signed Alien status.pdf	10/07/2025
	Title 4 Basic training certificate.pdf	10/07/2025
	_Personal_Info_Question.pdf	10/07/2025

State of Arizona **Department of Liquor Licenses and Control**

Created 10/23/2025 @ 10:54:52 AM

Local Governing Body Report

LICENSE

Number:

INP080035534

Type:

Expiration Date:

INP INTERIM PERMIT

60th 12-22

01/28/2026

Name:

OASIS MINI MART

State:

Issue Date:

Location:

Active

10/23/2025

10/23/2025

Original Issue Date:

2201 MCCULLOCH BOULEVARD N

LAKE HAVASU CITY, AZ 86403

USA

Mailing Address:

Phone: Alt. Phone:

Email:



AGENT

Name:

KENNETH K MEYERS JR

Gender:

Male

Correspondence Address:

Phone:

Alt, Phone:

Email:



OWNER

Name:

KABCL LLC

KENNETH MEYERS JR

Contact Name:

LIMITED LIABILITY COMPANY

Type:

AZ CC File Number:

23861326

State of Incorporation: AZ

Incorporation Date:

Correspondence Address:

Phone:

Alt. Phone:

Email:



APPLICATION INFORMATION

Application Number:

361991

Application Type:

New Application

Created Date:

09/24/2025

QUESTIONS & ANSWERS

INP Interim Permit

- 1) Enter License Number currently at location 0100 8002 1619
- 2) Is the license currently in use? Yes
- 3) Will you please submit section 5, page 6, of the license application when you reach the upload page?

'25 OCT 15 Ligr. Lic. MM 8 43 '25 SEP 16 AM 8 53 AZDLLC

SECTION 5 Interim Permit

ALCHON O MINCHINI T CHAM						
f you intend to operate business while the a For approval of an interim permit; There mus	t be a valid licer	nse of the so	ame series correrii	ly issued to t	ne localion.	
Current license number at the location:	010080002	1619	2. Is the licen	se currently	in use? 🛮 Ye	s 🗆 No
2. If the license is NOT currently in use, how l	ong has it been	since the lic	ense was last use	d at this loca	ation?	
(Print Full Name) Faraz Zuba Controlling Person on the stated license an	d location.	hereb	y declare that I ar	1	-6	
State of Acizona County of Mohave Signed before me on this 15th day of Motary Signature My commission expires on 12/06	August Honly	20 25 .		Tiffany Bot Notary P Mohave Coun ly Comm. Expl Commission N	ty, Arizona	
My commission expires on 12/06	136			Notary S	ea <u>l</u>	
SECTION 6 Background Check EACH PERSON LISTED MUST SUBMIT A QUEST	IONNAIRE, FING	ERPRINT CA	RD, AND \$22 PRO	CESSING FEE	E PER CARD.	
1. If the applicant is an entity, and not an ir						
a) Date Incorporated/Organized:	8/2/25	_ State wh	ere Incorporated	/Organized:	Arizo	NA
b) AZ Corporation or AZ L.L.C. Entity	No: 2386	1326	Approval D	1	2/25	
List any individual or entity that owns a b the applicant is owned by another entity	eneficial interest	of 10% or n	nore and/or contr chart showing the	rols the appl e ownership	icant or licens structure.	see. If
Last First Middle	Title	%Owned	Mailing Address	City	State	Zip
Meyers In Kenneth K	own er	50				

Last	F	irst 1	Middle	Title	%Owned	Mailing Address	City	State	Zip
Meyers	In	Kenneth	k	own er	50				
		1	,						-
				(Attach additio	and shoot if pe	Cossan/)			

(Attach additional sheet if necessary)

