

State of Arizona
Department of Liquor Licenses and Control

Created 12/29/2025 @ 02:39:19 PM

Local Governing Body Report

LICENSE

Number:	010070015874	Type:	010 BEER AND WINE STORE
Name:	PESCADERIA PLAYAS DE GUAYMAS		
State:	Pending		
Issue Date:		Expiration Date:	12/31/2025
Original Issue Date:	10/28/2021		
Location:	8385 NW GRAND AVENUE #A PEORIA, AZ 85345 USA		
Mailing Address:	7952 W GOLD DUST AVENUE #3 PEORIA, AZ 85345 USA		
Phone:	(000)000-0000		
Alt. Phone:	(480)353-8035		
Email:	TJMORSE1208@Q.COM		

Currently, this license has pending applications.

AGENT

Name:	THERESA JUNE MORSE
Gender:	Female
Correspondence Address:	7952 W GOLD DUST AVENUE #3 PEORIA, AZ 85345 USA
Phone:	(480)353-8035
Alt. Phone:	
Email:	TJMORSE1208@Q.COM

OWNER

Name: PESCADERIA PLAYAS DE GUAYMAS LLC
 Contact Name: THERESA JUNE MORSE
 Type: LIMITED LIABILITY COMPANY
 AZ CC File Number: 23146897 State of Incorporation: AZ
 Incorporation Date: 11/02/2020
 Correspondence Address: 7952 W GOLD DUST AVENUE
 #3
 PEORIA, AZ 85345
 USA
 Phone: (480)353-8035
 Alt. Phone:
 Email: LICENSING@AAICLIQUOR.COM

Officers / Stockholders

Name:	Title:	% Interest:
VICTOR M MARCIAL DURAZO	Member LLC	50.00
MARIA MONTSERRAT MARCIAL	MemBER LLC / PREMISE MANAGER	50.00

**PESCADERIA PLAYAS DE GUAYMAS LLC -
 Member LLC**

Name: VICTOR M MARCIAL DURAZO
 Gender: Male
 Correspondence Address: 7952 W GOLD DUST AVENUE
 #3
 PEORIA, AZ 85345
 USA
 Phone: (602)446-7509
 Alt. Phone:
 Email: MMARCIAL@CACHISFOODDISTRIBUTIONSLLC.COM

**PESCADERIA PLAYAS DE GUAYMAS LLC -
 MemBER LLC / PREMISE MANAGER**

Name: MARIA MONTSERRAT MARCIAL
 Gender: Female
 Correspondence Address: 7952 W GOLD DUST AVENUE
 #3
 PEORIA, AZ 85345
 USA
 Phone: (480)453-7706
 Alt. Phone:
 Email: MMARCIAL@CACHISFOODDISTRIBUTIONSLLC.COM

MANAGERS

Name: MARIA MONTSERRAT MARCIAL
Gender: Female
Correspondence Address: 7952 W GOLD DUST AVENUE
#3
PEORIA, AZ 85345
USA
Phone: (480)453-7706
Alt. Phone:
Email: MMARCIAL@CACHISFOODDISTRIBUTIONSLLC.COM

APPLICATION INFORMATION

Application Number: 375406
Application Type: Acquisition of Control
Created Date: 12/22/2025

QUESTIONS & ANSWERS

010 Beer and Wine Store

- 3) Have you submitted a questionnaire? Each person listed must submit a questionnaire and mail in a fingerprint card along with a \$22 processing fee per card.
Yes



Arizona Department of Liquor Licenses and Control
https://www.azliquor.gov
(602) 542-5141

DLIC USE ONLY

Job #:	375406
Date Accepted:	12-22-2025
License #:	0100070015874

ACQUISITION OF CONTROL
\$100.00 NON-REFUNDABLE APPLICATION FEE

The Acquisition application fee is \$100.00 except where a licensee holds multiple licenses and requests simultaneous changes, then the fee is \$100.00 for the first application and \$50.00 for each additional license not to exceed \$1000.00

Acquisition: When a person other than those persons originally licensed acquires control over a license or licensee.

License #: ~~0100070015874~~ 0100070015874

Agent Name: MORSE THERESA JUNE
Last First Middle

Licensee (Legal Entity): PESCADERIA PLAYAS DE GUAYMAS, LLC AZCC File #: 23146897

Business Name (DBA): PESCADERIA PLAYAS DE GUAYMAS

Business Address: 8385 NW GRAND AVENUE STE A PEORIA AZ MARICOPA 85345
Street City State Zip Code

Business Phone: 623-878-0831 Cell Number: 480-353-8035

Mailing Address: 530 E MCDOWELL RD STE 107-241 PHOENIS AZ 85004
Street City State Zip Code

Email Address: LICENSING@AAICLIQUOR.COM

Each New Person listed **must** submit a questionnaire and fingerprint card, unless already disclosed to the Department.

Name of New and Current Controlling Persons (attach additional sheet if necessary)

New	Controlling Person's Name	Title	Address
X	MARCIAL MARIA MONTSERRAT	MEMBER	8385 NW GRAND AVENUE STE A PEORIA AZ 85345
	MARCIAL-DURAZO VICTOR M	MEMBER	8385 NW GRAND AVENUE STE A PEORIA AZ 85345

Stockholders/Controlling Persons owning 10% or more (attach additional sheet if necessary)

New	Controlling Person's Name	% Owned	Address
X	MARCIAL MARIA MONTSERRAT	50	8385 NW GRAND AVENUE STE A PEORIA AZ 85345
	MARCIAL-DURAZO VICTOR M	50	8385 NW GRAND AVENUE STE A PEORIA AZ 85345

ATTACH AN OWNERSHIP FLOWCHART SHOWING THE OFFICERS, MEMBERS, CONTROLLING PERSON AND ANYONE HOLDING 10% OR MORE.

Declaration:
I, (Print Name) THERESA JUNE MORSE, declare under penalty of perjury that I am authorized by the licensee to submit this application. I have read the contents of this application and to the best of my knowledge believe all statements made on this application to be true and correct.

Signature _____

'25DEC 22 AM 11:55 AZD LLC

December 22, 2025

To Whom it may concern,

Re: 0100070015874

My partner CARLOS ALONSO MIRANDA- GALINDO, has relinquished his 50% ownership in Pescaderia Playas De Guaymas LLC to Maria Montserrat Marcial this date of December 22 2025.

Sincerely,

A large black rectangular redaction box covers the signature area.

x

Victor M. Marcial-Durazo



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DLLC USE ONLY

Job #: 375406

Date Accepted: 12-22-2025

License #: 010070015874
MMT 8-8-21

**Personal Information
Questionnaire**

ATTENTION APPLICANT: This is a legally binding document. 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.

THE COMPLETED QUESTIONNAIRE NEEDS TO BE SUBMITTED TO THE DEPARTMENT ALONG WITH A \$22. FEE, AND FD-258 FINGERPRINT CARD, THAT HAS BEEN SEALED IN AN ENVELOPE, AND SIGNED OR INITIALED BY THE FINGERPRINT TECHNICIAN, MUST INCLUDE THE FINGERPRINT VERIFICATION FORM. MUST BE COMPLETED BY A RECOGNIZED FINGERPRINT SERVICE OR LAW ENFORCEMENT AGENCY.

Agent: a person who is designated by an applicant or licensee to receive communications from the department and to file and sign documents submitted to the department on behalf of the applicant or licensee. An agent is not a manager.
A.R.S. §4-202(A).

Controlling Person: person directly or indirectly possessing control of an applicant or licensee.
A.R.S. §4-101(10).

Manager: An individual (not an entity) approved by the Department of Liquor who has the authority to organize, direct, carry out, control or to otherwise operate the day-to-day operations of a liquor-licensed business.
A.R.S. §4-101(22) and A.R.S. §4-202(C)

SECTION - 1 INDIVIDUAL INFORMATION

AGENT CONTROLLING PERSON MANAGER

- 1. Name: MORSE THERESA JUNE
Last First Middle
- 2. Social Security #: [REDACTED] Birth Date: [REDACTED]
(NOT a public record)
- 3. Driver's License #: [REDACTED] State Issued: [REDACTED]
(NOT a public record)
- 5. Are you a resident of Arizona? Yes No Date of residency: [REDACTED]
- 6. Email address: LICENSING@AAICLIQUOR.COM
- 7. Home Address: [REDACTED]
- 8. Daytime phone #: 480-353-8035 Alternative phone #: 480-353-8035

SECTION 2 – LICENSED BUSINESS INFORMATION

- 1. License Number: 010070015874
- 2. Business Name (doing business as): PESCADERIA PLAYAS DE GUAYMAS
- 3. Business Address: 8385 NW GRAND AVE STE A PEORIA AZ 85345

SECTION 3 – DAY TO DAY OPERATION OF BUSINESS

25 DEC 22 AM 11:52 AZDILLC

Must attach copies of Basic and Management Title 4 training certificates for person managing the day to day operation of the licensed business.

Who is managing the day to day operations? Agent Controlling Person Manager

Name of persons who will be handling the day to day operations: _____

MARIA MONTSERRAT MARCIAL


SECTION 4 – BACKGROUND

If you answer "YES" to any Question 1 through 5 YOU MUST attach a signed statement. Give complete details including dates, agencies involved and dispositions. CHANGES TO QUESTIONS 1-5 MAY NOT BE ACCEPTED

- 1. Have you owned, or been a controlling person of any entities that held a liquor license in Arizona, or any jurisdiction, in the past 5 years? Yes No
- 2. Have you been cited, arrested, indicted, convicted, or required to appear in court for violation of ANY criminal law or ordinance, regardless of the disposition, even if dismissed or expunged, within the past 5 years? Yes No
- 3. 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 5 years? A.R.S. §4-202(D) Yes No
- 4. Have you had ANY administrative law citations, compliance actions, or consents, in any jurisdiction in the past 5 years? (Do not include civil traffic tickets) A.R.S. §4-202, 4-210 Yes No
*Administrative Law Violations are any civil penalties, fines, suspension, or revocations of your liquor license.
- 5. Has anyone EVER obtained a judgement against you the subject of which involved fraud or misrepresentation? Yes No

SIGNATURE

I, (Print Full Name) THERESA JUNE MORSE hereby swear under penalty of perjury and in compliance with A.R.S. § 4-210(A)(2) and (3) that I have read and understand the foregoing and verify that the information and statements that I have made herein are true and correct to the best of my knowledge.

Signature:  Date: 12/21/2025



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https://www.azliquor.gov
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DLLC USE ONLY

Job #:	375406
Date Accepted:	12-22-2025
	[Redacted]
License #:	010070015874

ALIEN STATUS

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

APPLICANT NAME (Print or type) THERESA JUNE MORSE

SECTION II – CITIZENSHIP OR NATIONAL STATUS

Are you a citizen or national of the United States? Yes No - If yes, indicate place of birth:
City [Redacted] State [Redacted] COUNTRY USA

If you answered Yes, 1) Attach a legible copy of a document from the list below.
2) Name of document: AZ DRIVER LICENSE

If you answered No, you must complete Sections III.

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 Jan. 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.

SECTION III – QUALIFIED ALIEN

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.
14. **Otherwise Lawfully Present**
15. 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. §

THERESA JUNE MORSE

Print Name

11/6/25

Date



Arizona Department of Liquor Licenses and Control
https://www.azliquor.gov
(602) 542-5141

DLLC USE ONLY

Job #:	315406
Date Accepted:	12-23-2025
License #	010070015874

Personal Information Questionnaire

ATTENTION APPLICANT: This is a legally binding document. 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.

THE COMPLETED QUESTIONNAIRE NEEDS TO BE SUBMITTED TO THE DEPARTMENT ALONG WITH A \$22. FEE, AND FD-258 FINGERPRINT CARD, THAT HAS BEEN SEALED IN AN ENVELOPE, AND SIGNED OR INITIALED BY THE FINGERPRINT TECHNICIAN, MUST INCLUDE THE FINGERPRINT VERIFICATION FORM. MUST BE COMPLETED BY A RECOGNIZED FINGERPRINT SERVICE OR LAW ENFORCEMENT AGENCY.

fp pending 805-783

Agent: a person who is designated by an applicant or licensee to receive communications from the department and to file and sign documents submitted to the department on behalf of the applicant or licensee. An agent is not a manager.

A.R.S. §4-202(A).

Controlling Person: person directly or indirectly possessing control of an applicant or licensee.

A.R.S. §4-101(10).

Manager: An individual (not an entity) approved by the Department of Liquor who has the authority to organize, direct, carry out, control or to otherwise operate the day-to-day operations of a liquor-licensed business.

A.R.S. §4-101(22) and A.R.S. §4-202(C)

SECTION - 1 INDIVIDUAL INFORMATION

AGENT CONTROLLING PERSON MANAGER

- Name: MARCIAL MARIA MONTSEERRAT
Last First Middle
- Social Security #: [REDACTED] Birth Date: [REDACTED]
(NOT a public record)
- Driver's License #: [REDACTED] State Issued: [REDACTED]
(NOT a public record)
- Are you a resident of Arizona? Yes No Date of residency: [REDACTED]
- Email address: SALES@PESCAGUAYMAS8385.COM
- Home Address: [REDACTED]
- Daytime phone #: 480-453-7706 Alternative phone #: 480-353-8035

SECTION 2 -- LICENSED BUSINESS INFORMATION

- License Number: 010070015874
- Business Name (doing business as): PESCADERIA PLAYAS DE GUAYMAS
- Business Address: 8385 NW GRAND AVE STE A PEORIA AZ 85345

SECTION 3 – DAY TO DAY OPERATION OF BUSINESS

25 DEC 22 AM 11:53 AZD LLC

Must attach copies of Basic and Management Title 4 training certificates for person managing the day to day operation of the licensed business.

Who is managing the day to day operations? Agent Controlling Person Manager

Name of persons who will be handling the day to day operations: _____

MARCIAL, MARIA MONTSERRAT

SECTION 4 – BACKGROUND

If you answer "YES" to any Question 1 through 5 YOU MUST attach a signed statement. Give complete details including dates, agencies involved and dispositions. CHANGES TO QUESTIONS 1-5 MAY NOT BE ACCEPTED

- 1. Have you owned, or been a controlling person of any entities that held a liquor license in Arizona, or any jurisdiction, in the past 5 years? Yes [] No [x]
2. Have you been cited, arrested, indicted, convicted, or required to appear in court for violation of ANY criminal law or ordinance, regardless of the disposition, even if dismissed or expunged, within the past 5 years? Yes [] No [x]
3. 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 5 years? A.R.S. §4-202(D) Yes [] No [x]
4. Have you had ANY administrative law citations, compliance actions, or consents, in any jurisdiction in the past 5 years? (Do not include civil traffic tickets) A.R.S. §4-202, 4-210 *Administrative Law Violations are any civil penalties, fines, suspension, or revocations of your liquor license. Yes [] No [x]
5. Has anyone EVER obtained a judgement against you the subject of which involved fraud or misrepresentation? Yes [] No [x]

SIGNATURE

I, (Print Full Name) MARIA MONTSERRAT MARCIAL hereby swear under penalty of perjury and in compliance with A.R.S. § 4-210(A)(2) and (3) that I have read and understand the foregoing and verify that the information and statements that I have made herein are true and correct to the best of my knowledge. Signature: [Redacted] Date: 12/21/2025



Arizona Department of Liquor Licenses and Control
https://www.azliquor.gov
(602) 542-5141

DLLC USE ONLY

Job#?	375406
Date Accepted:	12-22-2025
License #:	010096015874

FINGERPRINT VERIFICATION

[Redacted] 3

ATTENTION FINGERPRINT TECHNICIAN:

Please follow the instructions below for fingerprinting this applicant.

1. Please fill out or ensure that the applicant has filled out all the required boxes on the fingerprint card prior to taking the fingerprints.
2. Request a valid, unexpired government-issued photo ID from the applicant and compare the physical descriptors on the applicant's photo ID to the applicant and to the information on the fingerprint card.
3. Fill out the information in the boxes below. **Please print clearly.**
4. Once the prints have been taken, place the fingerprint card and this form into the envelope and seal it. Please write your name or identification across the edge of the seal. Return the sealed envelope to the applicant.
5. **Write applicants name on front of sealed envelope.**

Do not give the applicant the fingerprint card without first sealing it inside the envelope.

DO NOT FOLD FINGERPRINT CARDS

Please print in the following fields:

Date	Name of Applicant:	
12/22/25	Maria Monserrat Marcial	
Name of Fingerprint Technician:		
Leslie Morales		
Fingerprint technician's Signature:		
[Redacted Signature]		
Fingerprint technician's Agency/company Name:		Phone Number:
The UPS Store 6120		602 2581995
Type of Photo ID Provided (check one):		
<input checked="" type="checkbox"/> Driver's License <input type="checkbox"/> Passport <input type="checkbox"/> Other (Please specify)		

Certificate # _____

Certificate of Completion For Title 4 **MANAGEMENT** Liquor Law Training

A Certificate of Completion must be on a form provided by the Arizona Department of Liquor. Certificates are completed by a state-approved training provider and, when issued, the Certificate is signed by the course participant.

Basic Title 4 training is a prerequisite for MANAGEMENT Title 4 training. A valid Certificate of Completion for BASIC Title 4 training must be on file at the Department of Liquor and satisfactory completion of a State-approved BASIC Title 4 course must be verified by the training provider prior to issuing a Certificate of Completion for MANAGEMENT Title 4 training.

A replacement Certificate of Completion for Title 4 training must be available through the training provider for two years after the training completion date.

Student Information

MARIA MONTSERRAT MARCIAL



12/21/25

Training Completion Date

12/21/28

Certificate Expiration Date
(three years from completion date)

Training Provider Information

Avant Garde Alcohol Training & Education

Company Name

530 East McDowell Road, #107-241 Phoenix, AZ 85004

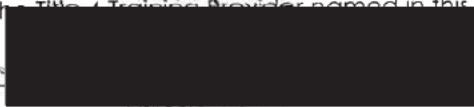
Mailing Address

(480) 353-8035

Daytime Contact Phone Number

I, **THERESA J MORSE**, certify that the above named individual did successfully complete
Instructor Name (please print)

Title 4 MANAGEMENT Training in accordance with A.R.S. § 4-112(G)(2) and Arizona Administrative Code (A.A.C.)R19-1-103 using training course content and materials approved by the Arizona Department of Liquor Licenses and Control. I understand that misuse of this Certificate of Completion can result in the revocation of State-approval for the Title 4 Training Provider named in this section as provided by A.A.C. R19-1-103(E) and (F).



21 / 12 / 25

Day Mo Year

Persons required to complete BASIC & MANAGEMENT Title 4 training: 1) owner(s) actively involved in the daily business operations of a liquor-licensed business of a series listed below
2) licensees, agents and managers actively involved in the daily business operations of a liquor-licensed business of a series listed below

In-state Microbrewery (series 3)
Conveyance (series 8)
Restaurant (series 12)

Government (series 5)
Liquor Store (series 9)
In-state Farm Winery (series 13)

Bar (series 6)
Private Club (series 14)

Beer & Wine Bar (series 7)
Hotel/Motel w/restaurant (series 11)
Beer & Wine Store (series 10)

Liquor license applications (initial and renewal) are not complete until valid Certificates of Completion for all required persons have been submitted to the Department of Liquor.

The questionnaire (which designates a manager to a location) and the agent change form (which assigns a new agent to active liquor licenses) are not complete until valid Certificates of Completion for all required persons have been submitted to the Department of Liquor.