

Department of Alcoholic Beverage Control  
**APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE**  
ABC 211 (6/99)

State of California

**TO:** Department of Alcoholic Beverage Control  
1137 WESTRIDGE PARKWAY  
SALINAS, CA 93907  
(831) 755-1990

File Number: **665085**  
Receipt Number: **2953927**  
Geographical Code: **4400**  
Copies Mailed Date: **November 26, 2024**  
Issued Date:

**DISTRICT SERVING LOCATION:** SALINAS

**First Owner:** **LIANG, GANG HU**  
**Name of Business:** **FUJI SUSHI**  
**Location of Business:** **4610 SOQUEL DR**  
**SOQUEL, CA 95073-2125**

**County** **SANTA CRUZ**

**Is Premises inside city limits** **No** **Census Tract:** **1220.05**

**Mailing Address:(If different  
from  
premises address)**

**Type of license(s):** **41** **Dropping Partner:** Yes\_\_\_ No X

**Transferor's license/name:** **548179 / GOLDEN FU WAH, INC**

<u>License Type</u>	<u>Transaction Type</u>	<u>Master</u>	<u>Secondary LT And Count</u>		
41 - On-Sale Beer And Wine - Eating	PER	Y			
<u>License Type</u>	<u>Transaction Description</u>	<u>Fee Code</u>	<u>Dup</u>	<u>Date</u>	<u>Fee</u>
Application Fee	PERSON TO PERSON TRF	NA	0	11/26/24	\$395.00
Application Fee	ISSUE TEMPORARY PERMIT	NA	1	11/26/24	\$100.00
41 - On-Sale Beer And Wine - Ea	ANNUAL FEE	NA	0	11/26/24	\$530.00
Total					\$1,025.00

**Have you ever been convicted of a felony?** **No**

**Have you ever violated any provisions of the Alcoholic Beverage Control Act, or regulations of the  
Department pertaining to the Act?** **No**

**STATE OF CALIFORNIA** **County of SANTA CRUZ**

**Date:** **November 26, 2024**

**Applicant Name(s)**

**LIANG, GANG HU**