

State of Arizona
Department of Liquor Licenses and Control

#339918

Created 03/28/2025 @ 11:53:54 AM

Local Governing Body Report

LICENSE

Number: Type: 012 RESTAURANT
Name: DINO'S GREEK & ITALIAN
State: Pending
Issue Date: Expiration Date:
Original Issue Date:
Location: 1550 N DYSART ROAD
#B8
GOODYEAR, AZ 85338
USA
Mailing Address: 1550 N DYSART ROAD
#B8
GOODYEAR, AZ 85338
USA
Phone: (623)535-8380
Alt. Phone: (206)335-5191
Email: DINOSREST2007@GMAIL.COM

AGENT

Name: KONSTANTINOS KATSAROS
Gender: Male
Correspondence Address: 1550 N DYSART ROAD
#B8
GOODYEAR, AZ 85338
USA
Phone: (206)335-5191
Alt. Phone: (480)273-2635
Email: DINO_KATSAROS@YAHOO.COM

OWNER

60th day - 05/27/25

105th day - 07/11/2025

Name: EL GREKO PARTNERS LLC
Contact Name: ALEXANDRA KATSAROS
Type: LIMITED LIABILITY COMPANY
AZ CC File Number: 23474010 State of Incorporation: AZ
Incorporation Date: 01/19/2023
Correspondence Address: 1550 N DYSART ROAD
#B8
GOODYEAR, AZ 85338
USA
Phone: (623)535-8380
Alt. Phone: (206)331-5313
Email: ALEKAKIBALAMOTAKI@GMAIL.COM

Officers / Stockholders

Name:	Title:	% Interest:
ALEXANDRA KATSAROS	Member	100.00
KONSTANTINOS KATSAROS	Manager-LLC	0.00

EL GREKO PARTNERS LLC - Manager-LLC

Name: KONSTANTINOS KATSAROS
Gender: Male
Correspondence Address: 3401 N 37TH STREET
#18
PHOENIX, AZ 85018
USA
Phone: (623)535-8380
Alt. Phone:
Email: DINO_KATSAROS@YAHOO.COM

EL GREKO PARTNERS LLC - Member

Name: ALEXANDRA KATSAROS
Gender: Female
Correspondence Address: 1672 N 158TH AVENUE
GOODYEAR, AZ 85395
USA
Phone: (623)535-8380
Alt. Phone:
Email: ALEKAKIBALAMOTAKI@GMAIL.COM

MANAGERS

Name: KONSTANTINOS KATSAROS
Gender: Male
Correspondence Address: 3401 N 37TH STREET
#18
PHOENIX, AZ 85018
USA
Phone: (623)535-8380
Alt. Phone:
Email: DINO_KATSAROS@YAHOO.COM

Name: KONRAD GERARD DIXON
Gender: Male
Correspondence Address: 1550 N DYSART ROAD
#B8
GOODYEAR, AZ 85338
USA
Phone: (623)466-4845
Alt. Phone:
Email: K_RAD66@YAHOO.COM

APPLICATION INFORMATION

Application Number: 339918
Application Type: New Application
Created Date: 03/21/2025



QUESTIONS & ANSWERS

012 Restaurant

- 1) Are you applying for an Interim Permit (INP)?
Yes
What date are you taking ownership? Please upload the Interim Permit Notary page when you reach the upload page.
3/28/2025
- 2) Are you one of the following? Please indicate below.
Property Tenant
Subtenant
Property Owner
Property Purchaser
Property Management Company
TENANT
- 3) Is there a penalty if lease is not fulfilled?
Yes
What is the penalty?
LATE FEES AND 10% INTEREST RATE PER YEAR
- 4) Is the Business located within the incorporated limits of the city or town of which it is located?
Yes
- 5) What is the total money borrowed for the business not including the lease?
Please list each amount owed to lenders/individuals.
1,024,000.00
SMALL BIZ ADMINISTRATION
PO BOX 3918 PORTLAND OR 97208
- 6) Are there walk-up or drive-through windows on the premises?
No
- 7) Does the establishment have a patio?
Yes
Is the patio contiguous or non-contiguous (within 30 feet)?
CONTIGUOUS
- 8) Is your licensed premises now closed due to construction, renovation or redesign or rebuild?
No
- 9) What type of business will this license be used for?
FULL SERVICE RESTAURANT

State of Arizona
Department of Liquor Licenses and Control

Created 03/28/2025 @ 11:42:55 AM

Local Governing Body Report

LICENSE

Number:	INP070032692	Type:	INP INTERIM PERMIT
Name:	DINO'S GREEK & ITALIAN		
State:	Active		
Issue Date:	03/28/2025	Expiration Date:	07/11/2025
Original Issue Date:	03/28/2025		
Location:	1550 N DYSART ROAD #B8 GOODYEAR, AZ 85338 USA		
Mailing Address:	1550 N DYSART ROAD #B8 GOODYEAR, AZ 85338 USA		
Phone:	(623)535-8380		
Alt. Phone:	(206)335-5191		
Email:	SINOSREST2007@GMAIL.COM		

AGENT

Name:	KONSTANTINOS KATSAROS
Gender:	Male
Correspondence Address:	1550 N DYSART ROAD #B8 GOODYEAR, AZ 85338 USA
Phone:	(206)335-5191
Alt. Phone:	(480)273-2635
Email:	DINO_KATSAROS@YAHOO.COM

OWNER

Name: EL GREKO PARTNERS LLC
Contact Name: ALEXANDRA KATSAROS
Type: LIMITED LIABILITY COMPANY
AZ CC File Number: 23474010 State of Incorporation: AZ
Incorporation Date: 01/19/2023
Correspondence Address: 1550 N DYSART ROAD
#B8
GOODYEAR, AZ 85338
USA
Phone: (623)535-8380
Alt. Phone: (206)331-5313
Email: ALEKAKIBALAMOTAKI@GMAIL.COM

Officers / Stockholders

Name:	Title:	% Interest:
ALEXANDRA KATSAROS	Member	100.00
KONSTANTINOS KATSAROS	Manager-LLC	0.00

EL GREKO PARTNERS LLC - Manager-LLC

Name: KONSTANTINOS KATSAROS
Gender: Male
Correspondence Address: 3401 N 37TH STREET
#18
PHOENIX, AZ 85018
USA
Phone: (623)535-8380
Alt. Phone:
Email: DINO_KATSAROS@YAHOO.COM

EL GREKO PARTNERS LLC - Member

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Gender: Female
Correspondence Address: 1672 N 158TH AVENUE
GOODYEAR, AZ 85395
USA
Phone: (623)535-8380
Alt. Phone:
Email: ALEKAKIBALAMOTAKI@GMAIL.COM

MANAGERS

Name: KONSTANTINOS KATSAROS
Gender: Male
Correspondence Address: 3401 N 37TH STREET
#18
PHOENIX, AZ 85018
USA
Phone: (623)535-8380
Alt. Phone:
Email: DINO_KATSAROS@YAHOO.COM

Name: KONRAD GERARD DIXON
Gender: Male
Correspondence Address: 1550 N DYSART ROAD
#B8
GOODYEAR, AZ 85338
USA
Phone: (623)466-4845
Alt. Phone:
Email: K_RAD66@YAHOO.COM

APPLICATION INFORMATION

Application Number: 339920
Application Type: New Application
Created Date: 03/21/2025

QUESTIONS & ANSWERS

INP Interim Permit

- 1) Enter License Number currently at location
12079073
- 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?
Yes
A Document of type INTERIM NOTARY PAGE is required.

SECTION 5 Interim Permit

If you intend to operate business while the application is pending, you will need an interim permit pursuant to A.R.S. § 4-203.01. For approval of an interim permit: There must be a valid license of the same series currently issued to the location.

- Current license number at the location: 12079073 2. Is the license currently in use? ☒ Yes ☐ No
- If the license is **NOT** currently in use, how long has it been since the license was last used at this location? _____

I (Print Full Name) Alexandra Katsaros hereby declare that I am the Current Owner, Agent, or Controlling Person on the stated license and location.

Sign in front of Notary: _____

(Current Agent/Individual as listed on the license certificate)

State of <u>Arizona</u> County of <u>Maricopa</u> Signed before me on this <u>6th</u> day of <u>December</u>, 20<u>24</u>. Notary Signature <u>[Signature]</u> My commission expires on <u>05/01/28</u>	 Notary Seal
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SECTION 6 Background Check

EACH PERSON LISTED MUST SUBMIT A QUESTIONNAIRE, FINGERPRINT CARD, AND \$22 PROCESSING FEE PER CARD.

- If the applicant is an entity, and not an individual, answer questions 1a-b.

a) Date Incorporated/Organized: 1/19/2023 State where Incorporated/Organized: Arizona

b) AZ Corporation or AZ L.L.C. Entity No: 23474010 Approval Date: 1/26/2023

- List any individual or entity that owns a beneficial interest of 10% or more and/or controls the applicant or licensee. If the applicant is owned by another entity, attach an organizational chart showing the ownership structure.

Last	First	Middle	Title	%Owned	Mailing Address	City	State	Zip
Katsaros	Konstantinos		Manager	0	3401 N 37th St #18	Phoenix	AZ	85018
Katsaros	Alexandra		Owner (100%)	100	1672 N 158th Ave	Goodyear	AZ	85395

(Attach additional sheet if necessary)

STATE OF ARIZONA

CERTIFICATION OF VITAL RECORD

ORIGINAL
STATE COPY

STATE OF ARIZONA DEPARTMENT OF HEALTH SERVICES-BUREAU OF VITAL RECORDS CERTIFICATE OF DEATH

State File Number
102-2023-010597

2018R21 PM 3:42 AZDLIC

1. DECEDENT'S LEGAL NAME (FIRST, MIDDLE, LAST, SUFFIX) PETER. KATSAROS		2. AKA'S (IF ANY)		3. DATE OF DEATH	
4. SEX MALE	5. SOCIAL SECURITY NUMBER	6. DATE OF BIRTH	7. AGE		
8. CITY/TOWN, COUNTY AND ZIP OR LOCATION OF DEATH GOODYEAR, MARICOPA, 85395					
9. PLACE OF DEATH (TYPE OF PLACE OF DEATH AND FACILITY NAME/ADDRESS) NURSING HOME/LONG TERM CARE - HOME OF HELPING HANDS ASSISTED LIVING					
10. BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY)		11. MARITAL STATUS MARRIED		12. NAME OF SURVIVING SPOUSE PRIOR TO FIRST MARRIAGE (FIRST, MIDDLE, LAST, SUFFIX)	
13. DECEDENT'S USUAL RESIDENCE ADDRESS (STREET, CITY, COUNTY, STATE, ZIP)					
14. DECEDENT'S HISPANIC ORIGIN(S) NO, NOT SPANISH/HISPANIC/LATINO		15. DECEDENT'S RACE(S) WHITE		16. EVER IN ARMED FORCES NO	
17. OCCUPATION ENTREPRENEUR		18. FATHER'S NAME (FIRST, MIDDLE, LAST, SUFFIX)			
19. MOTHER'S NAME PRIOR TO FIRST MARRIAGE (FIRST, MIDDLE, LAST, SUFFIX)		20. INFORMANT'S NAME (FIRST, MIDDLE, LAST, SUFFIX)			
21. RELATIONSHIP SON		22. INFORMANT'S MAILING ADDRESS			
23. NAME AND ADDRESS OF FUNERAL FACILITY OR RESPONSIBLE PERSON THOMPSON FUNERAL CHAPEL 926 S LITCHFIELD ROAD, GOODYEAR, AZ, 85338		24. FUNERAL DIRECTOR'S NAME OR RESPONSIBLE PERSON OLIVIA, M. BIEN		25. LICENSE NUMBER FDL-01719	
26. METHOD(S) OF DISPOSITION CREMATION		27. NAME AND LOCATION OF 1ST DISPOSITION FACILITY LIFEPLAN CREMATORY INC., PHOENIX, AZ, US		28. NAME AND LOCATION OF 2ND DISPOSITION FACILITY	
MEDICAL CERTIFICATION: SECTION CAUSE OF DEATH PART I					
29. A. IMMEDIATE CAUSE OF DEATH				30. APPROXIMATE INTERVAL YEARS	
31. B. DUE TO OR AS A CONSEQUENCE OF:				32. APPROXIMATE INTERVAL	
33. C. DUE TO OR AS A CONSEQUENCE OF:				34. APPROXIMATE INTERVAL	
35. D. DUE TO OR AS A CONSEQUENCE OF:				35. APPROXIMATE INTERVAL	
CAUSE OF DEATH PART II					
37. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO THE DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN PART I		38. INJURY? NO		39. INJURY AT WORK?	
40. MANNER OF DEATH NATURAL DEATH		41. TIME OF DEATH		42. WAS AN AUTOPSY PERFORMED? NO	
43. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE THE CAUSE OF DEATH?		44. NAME OF PERSON COMPLETING CAUSE OF DEATH MINDY, TATERA, TABER			
45. DATE CERTIFIED 02/22/2023		46. CERTIFIER'S ADDRESS 9435 W PEORIA AVENUE, PEORIA, AZ, 85345			

Date Registered: 02/28/2023

Date Issued: 03/07/2023

VS-49 Rev. 12/2017



This is a true certification of the facts on file with the Arizona Department of Health Services, Bureau of Vital Records, PHOENIX, ARIZONA.
Revised 07/2016

Krystal Colburn
KRYSTAL COLBURN

ASSISTANT STATE REGISTRAR



**ARIZONA DEPARTMENT
OF HEALTH SERVICES**

This copy not valid unless prepared on a form displaying the State Seal and impressed with the raised seal of the issuing agency.

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

CERTIFIED COPY

CLERK OF THE
SUPERIOR COURT
FILED JAN 21 PM 3:42 AZD LLC
L. McCARTY, DEP

24 JAN 10 PM 1:42

1 Frank L. Ross
2 Attorney At Law
3 12725 W. Indian School Road, Suite E-101
4 Avondale, Arizona 85392-9525
5 Telephone No. (623) 932-0100
6 Facsimile No. (623) 932-0615
7 flresq@aol.com
8 State Bar No. 002326
9 Attorney for Petitioner

10 **IN THE SUPERIOR COURT OF THE STATE OF ARIZONA**

11 **IN AND FOR THE COUNTY OF MARICOPA**

12 In the Matter of the Estate of,
13 **PETER KATSAROS,**
14 Deceased.

No. PB2024-070047

**LETTERS OF PERSONAL
REPRESENTATIVE AND
ACCEPTANCE (INTESTATE ESTATE)**

15 ALEXANDRA KATSAROS is hereby appointed as Personal Representative of this Estate
16 without restriction.

JEFF FINE, CLERK

17 WITNESS: JAN 10 2024, 2023

Clerk of the Superior Court

By L. McCarty
Deputy Clerk

L. McCarty



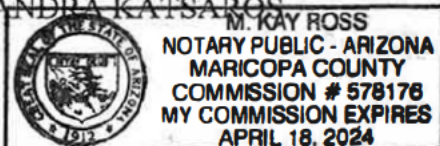
18 STATE OF ARIZONA)
19 County of Maricopa) ss.

20 I hereby accept the duties of Personal Representative of the Estate of the above-named
21 decedent and do solemnly swear that I will perform, according to law, the duties of such fiduciary.

22 DATED this 22nd day of December, 2023.

23 ALEXANDRA KATSAROS

24 SUBSCRIBED AND SWORN TO before me this 22nd day of December, 2023, by
25 ALEXANDRA KATSAROS



26 M. Kay Ross
Notary Public
My Commission Expires 4-18-2024

25 MAR 21 PM 3:42 AZD LLC

The foregoing instrument is a full, true and correct copy of
the original on file in this office.
I further certify that the Order Statement appointing the
☒ Personal Representative ☐ Guardian
☐ Conservator ☐ Special Administrator
was signed on JAN 10 2024 and that these
letters have not been revoked.

Attest JAN 10 2024 20
JEFF FINE, Clerk of the Superior Court of the State of
Arizona, in and for the County of Maricopa.
By L. McCreary Deputy



RESTAURANT/HOTEL/MOTEL OPERATION PLAN

Arizona Dept. of Liquor Licenses and Control
800 W. Washington St. 5th Floor Phoenix, AZ 85007
(602) 542-5141

Type or Print with **Black Ink**

1. Name of restaurant (Please print): Dino's Greek & Italian Grill

2. Must indicate the equipment below by Make, Model, and Capacity:

LIST ONLY THE FOLLOWING - NO ATTACHMENTS

Grill	1 Large Charbroiler Grill 2x3 feet
Oven	1 Blodgett Box oven, 6 Burner stove pizza oven wood
Freezer	3 chest freezers, 2 large 2 door freezer
Refrigerator	2 large 2 Dwr Fridge walk in 12x20
Sink	3 handwashing sinks, 3 in prep, one by office, two at use
Dish Washing Facilities	One large two tray dish pit
Food Preparation Counter (Dimensions)	One large 6 foot stainless, 12 foot on kitchen line
Other	

3. Attach a copy of your FULL menu with pricing **INCLUDING NON-ALCOHOLIC BEVERAGES**

4. What percentage of your public premises is used primarily for restaurant dining?

(Do not include kitchen, bar, hi-top tables, or game area.) 70 %

5. Does your restaurant have a bar area that is distinct and separate from the dining area? ☒ YES ☐ No

(If yes, what percentage of the public floor space does this area cover?) 30 %

6. List the **seating capacity** for:

a) Restaurant dining area of your premises: [90]

(DO NOT INCLUDE PATIO SEATING)

b) Bar area [+ 40]

TOTAL [= 130]

7. What type of dinnerware is primarily used in your restaurant? ☒ Reusable ☐ Disposable ☐ Both

8. Does your restaurant contain any **games, televisions, or any other entertainment**? ☒ YES ☐ No

If yes, specify what types and how many (examples: 4-TV's, 2-Pool Tables, 1-Video Game, etc.)

4 Televisions

9. Do you have live entertainment or dancing? ☐ YES ☒ No

If yes, what type and how often (example: DJ-2 x a week, Karaoke-2 x a month, Live Band-1 x a month, etc.)

10. List number of employees for each position:

Position	How many
Cooks	6
Bartenders	2
Hostesses / Buss	4
Managers	1
Servers	7
Other (Dishwasher)	2
Other (owners)	2
Other (consultant)	1

I, (Print Full Name) Konstantinos Katsaros 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.

Applicant Signature: 



RECORDS REQUIRED FOR AUDIT RESTAURANT/HOTEL/MOTEL

Arizona Dept. of Liquor Licenses and Control
800 W. Washington St. 5th Floor Phoenix, AZ 85007
(602) 542-5141

Type or Print with **Black Ink**

In the event of an audit, you will be asked to provide to the Department any documents necessary to determine Compliance with A.R.S. §4-205.02(G). Such documents requested may include however, are not limited to:

1. Name of restaurant (Please print): Dinos Greek & Italian
2. All invoices and receipts for the purchase of food and spirituous liquor for the licensed premises.
3. A list of **all** food and liquor vendors
4. The restaurant menu used during the audit period
5. A price list for alcoholic beverages during the audit period
6. Mark-up figures on food and alcoholic products during the audit period
7. A recent, **accurate** inventory of food and liquor (taken within two weeks of the Audit Interview Appointment)
8. Monthly Inventory Figures - beginning and ending figures for food and liquor
9. Chart of accounts (copy)
10. Financial Statements-Income Statements-Balance Sheets

11. General Ledger

A. Sales Journals/Monthly Sales Schedules

- 1) Daily sales Reports (to include the name of each waitress/waiter, bartender, etc. with sales for that day)
- 2) Daily Cash Register Tapes - Journal Tapes and Z-tapes
- 3) Dated Guest Checks
- 4) Coupons/Specials/Discounts
- 5) Any other evidence to support income from food and liquor sales

B. Cash Receipts/Disbursement Journals

- 1) Daily Bank Deposit Slips
- 2) Bank Statements and canceled checks

12. Tax Records

- A. Transaction Privilege Sales, Use and Severance Tax Return (copies)
- B. Income Tax Return - city, state and federal (copies)
- C. Any supporting books, records, schedules or documents used in preparation of tax returns

13. **Payroll Records**

- A. Copies of all reports required by the State and Federal Government
- B. Employee Log (A.R.S. §4-119)
- C. Employee time cards (actual document used to sign in and out each work day)
- D. Payroll records for all employees showing hours worked each week and hourly wages

14. **Off-site Catering Records** (must be complete and separate from restaurant records)

- A. All documents which support the income derived from the sale of food off the license premises.
- B. All documents which support purchases made for food to be sold off the licensed premises.
- C. All coupons/specials/discounts

The sophistication of record keeping varies from establishment to establishment. Regardless of each licensee's accounting methods, the amount of gross revenue derived from the sale of food and liquor must be substantially documented.

**REVOCATION OF YOUR LIQUOR LICENSE MAY OCCUR IF YOU FAIL TO COMPLY WITH
A.R.S. §4-210(A)7 AND A.R.S. §4-205.02(G).**

A.R.S. §4-210(A)7

The licensee fails to keep for two years and make available to the department upon reasonable request all invoices, records, bills or other papers and documents relating to the purchase, sale and delivery of spirituous liquors and, in the case of a restaurant or hotel-motel licensee, all invoices, records, bills or other papers and documents relating to the purchase, sale and delivery of food.

A.R.S. §4-205.02(G)

For the purpose of this section:

1. "Restaurant" means an establishment which derives **at least forty percent (40%)** of its gross revenue from the sale of food
2. "Gross revenue" means the revenue derived from all sales of food and spirituous liquor on the licensed premises regardless of whether the sales of spirituous liquor are made under a restaurant license issued pursuant to this section or under any other license that has been issued for the premises pursuant to this article.

I, (Print Full Name) Konstantinos Katsaros, 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.

Applicant Signature: _____

MAKE A COPY OF THIS DOCUMENT AND KEEP IT WITH RECORDS REQUIRED BY THE STATE



Dinner Menu
4pm - Close

25 MAR 21 PM 3:40 AZD LLC



STARTERS

Calamari

Golden fried calamari, served with tzatziki and marinara sauce 11.95

Saganaki OPA! 🍷

Traditional Greek cheese, flambéed table side, topped with lemon juice and served with pita bread 11.95

Dolmathes

Grape leaves stuffed with ground beef, rice, herbs, topped with lemon dill sauce. Served with pita bread 10.95

Bruschetta

Garlic bread brushed with olive oil, and topped with tomatoes, onions, basil, feta and balsamic glaze 8.95

Garlic Prawns

Five prawns oven baked in garlic butter 10.95

Spanakopita

Flaky spinach pastry made with spinach, eggs, feta and fresh herbs 9.95

Greek Fries

French fries topped with crumbled feta and oregano 6.95

Zucchini Cakes

Lightly battered and fried to golden perfection. Served with marinara 8.95

Chicken Wings

Marinated and fried. Served with side of marinara 12.95

SALADS

Salads are entree size. Served with pita bread and house dressing on the side

Gyro

Our traditional Greek salad with gyro meat 14.95

Greek

Romaine lettuce, cucumbers, tomatoes, onions, green peppers, feta cheese and Kalamata olives 12.95

Caesar

Romaine lettuce, tossed in caesar dressing with croutons and parmesan cheese 11.95

Salmon

Charbroiled salmon, served over romaine, tomatoes and cucumbers 14.95

+ Salmon 8.50, + Chicken 5.50

SOUPS

Soup of the day or Avgolemono

Cup 3.95 Bowl 5.95

DIPS

Served with pita bread.
One Dip 6.95, Two Dips 12

Tzatziki

Yogurt,
Cucumber,
Garlic

Hummus

Chickpea,
Garlic,
Tahini

Tirokafteri

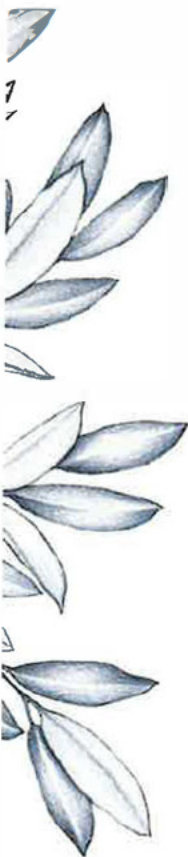
Spicy feta,
Jalapeno,
Roasted red peppers

Baba Ganoush

Eggplant,
Garlic

18% Gratuity added to parties of 6+ guests

Consuming raw or undercooked meat, poultry, seafood, shellfish or eggs may increase your chance of foodborne illness.





Lunch Menu
11am - 4pm

Starters

Calamari

Golden fried calamari, served with tzatziki and marinara sauce 11.95

Dolmathes

Grape leaves stuffed with ground beef, rice, herbs, topped with lemon dill sauce. Served with pita bread 9.95

Garlic Prawns

Five prawns, oven baked in garlic butter 9.95

Greek Fries

French fries topped with crumbled feta and oregano 6.95

Chicken Wings

Marinated and fried. Served with side of marinara 11.95

Saganaki OPA! 🇬🇷

Traditional Greek cheese, flambéed table side, topped with lemon juice and served with pita bread 11.95

Bruschetta

Garlic bread brushed with olive oil, and topped with tomatoes, onions, basil, feta and balsamic glaze 8.95

Spanakopita

Flaky pastry made with spinach, eggs, feta and fresh herbs 9.95

Zucchini Cakes

Lightly battered and fried to golden perfection. Served with side of marinara 8.95

Salads

Salads are served with pita bread and house dressing on the side

Gyro

Our traditional Greek salad with gyro meat 14.95

Caesar

Romaine lettuce, tossed in caesar dressing with croutons and parmesan cheese 11.95

Greek

Romaine lettuce, cucumbers, tomatoes, onions, green peppers, feta cheese and Kalamata olives 12.95

Salmon

Charbroiled salmon, served over romaine, tomatoes and cucumbers 14.95

+ Salmon 8.50 + Chicken 5.50

Soups

Avgolemeono or Soup of the Day

Cup 3.95 Bowl 5.95

Soup & Salad

Green salad, cup of soup, garlic cheese bread 9.95

Dips

Served with pita bread.
One Dip 6.95, Two Dips 12

Tzatziki

Yogurt,
Cucumber,
Garlic

Hummus

Chickpea,
Garlic,
Tahini

Tirokafteri

Spicy feta
jalapeno,
roasted red
peppers

Baba Ganoush

Eggplant,
Garlic

18% Gratuity added to parties of 6+ guests

Consuming raw or undercooked meat, poultry, seafood, shellfish or eggs may increase your chance of foodborne illness.

PITAS

Pitas refer to Greek style sandwiches wrapped in pita bread and served a la carte.
Add side of soup or salad 3.95
Add side of fries 2.49

Chicken Pita

Grilled chicken souvlaki wrapped in warm pita bread with lettuce, tomatoes, onions and a side of tzatziki 10.95

Gyro Pita

Gyro meat wrapped in warm pita with lettuce, tomatoes, onions and a side of tzatziki. Served a la carte with soft drink 9.95

Lamb Pita

Grilled lamb souvlaki wrapped in warm pita bread with lettuce, tomatoes, onions and a side of tzatziki 11.95

SANDWICHES

All sandwiches served with fries. Add a Greek or Caesar salad for 3.95

Burger

Burger topped with lettuce, tomato, onion, mayo 12.95

+ Cheese or bacon 1.50

Greek Burger

Topped with lettuce, tomato, onion, feta cheese, tzatziki 13.95

Meatball Sub

Meatballs topped with marinara, mozzarella and baked in oven on a french loaf 11.95

Chicken Parmesan

Lightly breaded chicken, topped with marinara, mozzarella on a french loaf 12.95

NY Steak Sandwich

Steak grilled to specification and topped with sautéed mushrooms and onions. Served on French loaf 15.95

Grilled Chicken

Juicy grilled chicken breast, topped with lettuce, tomato, onion and mayo 11.95

PIZZA & PASTA

Pizza & Calzone

Served with Cheese
10" Pizza 12.95
Calzone 12.95
Extra toppings 1.50

Toppings:
pepperoni, sausage, chicken, beef, gyro meat, bacon, artichoke hearts, green peppers, red peppers, mushrooms, black olives, onions, spinach, pineapple, tomatoes, garlic, feta, jalapeno, pepperoncini

Tuscany Pasta

Shrimp, chicken, bacon in garlic cream and wine sauce over penne pasta 13.95

Spaghetti

Served with marinara 10.95
Served with meat sauce 11.95

+ Baked with mozzarella 2.50

SIDES

2 Meatballs

4.50

Garlic Cheese Bread

4.50

Italian Sausage

4.50

18% Gratuity added to parties of 6+ guests

Consuming raw or undercooked meat, poultry, seafood, shellfish or eggs may increase your chance of foodborne illness.

25 MAR 21 PM 3:40 REDLLC

GREEK SPECIALTIES

All entrees served with Greek potatoes, sautéed vegetables and choice of green salad or soup.
Upgrade salad to Greek or Caesar for 3.95

Gyro Dinner

Gyro meat wrapped in warm pita bread with lettuce, tomatoes, onions and a side of tzatziki 18.95

Souvlaki

Marinated, seasoned and grilled.
Chicken Souvlaki 19.95
Lamb Souvlaki 22.95

Moussaka

Oven baked Greek casserole, with layers of potatoes, eggplant and ground beef. Topped with delicious béchamel sauce. 18.95

Pork Chops

Two juicy bone-in pork chops, seasoned and grilled 20.95

Lamb Chops

4 lamb chops marinated and grilled to specification. Our family's favorite! 30.95

Chicken Lemonato

Delicious lemon chicken perfectly seasoned and juicy 17.95

Greek Style Stir Fry

Lamb and chicken sautéed with mushrooms, red peppers, onions and feta in a delicious marsala sauce 23.95

The Greek Feast for Two

Spanakopita, moussaka, gyro meat, grilled lamb souvlaki, dolmathes, rice, potatoes, hummus, tzatziki, pita bread 55.95

STEAK & SEAFOOD

All entrees served with Greek potatoes, sautéed vegetables and choice of green salad or soup.
Upgrade salad to a Greek or Caesar for 3.95

10 oz NY Steak

Seasoned and Grilled,
Cut in-house 22.95
+Prawns 7

Filet of Salmon

Lightly seasoned and
baked to specification
20.95

Peter's Special

Prawns

Six prawns wrapped in
bacon, stuffed with
jalapeno and saganaki
cheese 23.95

ITALIAN SPECIALTIES

Served with green salad or soup. Upgrade salad to Greek or Caesar for 3.95

Tuscany Pasta

Shrimp, chicken and bacon, in a garlic cream and wine sauce over penne pasta 23.95

Chicken Piccata

Chicken sautéed with mushrooms, capers, lemon and artichoke hearts in white wine sauce, served over spaghetti 22.95

Dino's Fettuccini

Fettuccini with prawns, mushrooms, red peppers, artichoke hearts in garlic cream sauce. Topped with feta cheese 21.95

Fettuccini Carbonara

Smoked bacon, ham, mushrooms and peas in cream sauce 18.95

Chicken Marsala

Chicken, mushrooms and marsala wine over spaghetti 22.95

Chicken Parmesan

Chicken breast topped with homemade marinara and mozzarella cheese. Served with spaghetti and marinara 21.95

Greco Diablo

Penne pasta, Italian sausage, sweet bell peppers, onions and spicy red sauce 19.95

Baked Lasagna

Baked lasagna noodles with meat sauce, topped with mozzarella cheese 18.95

Fettuccini Alfredo

Fettuccini tossed in creamy, homemade Alfredo sauce 13.95
+ Chicken 5.50 or Italian sausage 4.50

Spaghetti

Served with marinara 13.95
Served with meat sauce 14.95
+ Baked with mozzarella 2.50

18% Gratuity added to parties of 6+ guests

Consuming raw or undercooked meat, poultry, seafood, shellfish or eggs may increase your chance of foodborne illness.

PITAS

All pita dinners served with fries. Add a Greek or Caesar salad for 3.95

Gyro Pita

Gyro meat wrapped in warm pita bread with lettuce, tomatoes, onions and a side of tzatziki 14.95

Souvlaki Pita

Grilled skewers served in warm pita with lettuce, tomatoes, onions and a side of tzatziki.

Lamb 16.95

Chicken 15.95

PIZZA & CALZONE

Cheese

10" Pizza or Calzone 12.95
Extra toppings 1.50

House Special

Ground beef, ham, pepperoni, sausage, onions, mushroom, green peppers and mozzarella
Pizza or Calzone 18.95

Meat Lovers

Pepperoni, Italian sausage, salami, ham, beef, mozzarella
Pizza or Calzone 17.95

Toppings: (1.50 each)

pepperoni, sausage, chicken, beef, gyro meat, bacon, artichoke hearts, green peppers, red peppers, mushrooms, black olives, onions, spinach, pineapple, tomatoes, garlic, feta, jalapeno, pepperoncini

SANDWICHES

All sandwiches served with fries. Add a Greek or Caesar salad for 3.95

Burger

Burger topped with lettuce, tomato, onion and mayo 15.95

+Cheese or bacon 1.50

Athenian Club

Big enough for 2! Triple decker pita sandwich with grilled chicken breast, gyro meat, bacon, lettuce, tomato and onions 19.95

Grilled Chicken Sandwich

Juicy grilled chicken breast, topped with lettuce, tomato, onion and mayo 14.95

SIDES

2 Meatballs

4.50

Garlic Cheese Bread

4.50

Italian Sausage

5.50



Wine

WHITE WINE

Principato Pinot Grigio, Italy

Fruit aromas with delicate floral notes. Crisp, light and elegant.
9.95 Glass || 35 Bottle

Kendall Jackson Sauvignon Blanc, CA

Limes, kiwi fruit, fresh green apples and a touch of passion fruit.
9.95 Glass || 36 Bottle

F. Coppola Chardonnay, CA

Rich and silky with flavors of pineapple, pear, guava and a hint of vanilla.
8.95 Glass || 32 Bottle

Kendall Jackson Chardonnay, CA

Medium bodied with light oak and acidity with pineapple and tropical fruit.
9.95 Glass || 36 Bottle

Tiziano Pinot Grigio, Italy

A medium-bodied wine with a clean, crisp oak finish.
9.95 Glass || 36 Bottle

RED WINE

Josh Red Blend, CA

Rich, velvety red blend bursts with flavors of ripe plum, black cherry and toasted cedar with scents of dark fruit and pepper.
9.95 Glass || 36 Bottle

Antinori Santa Christina Toscana Red Blend, Italy

Delicious blend with tastes of raspberry, black cherry, green tea and spice. Lovely floral aromas and flavors cascade across the palate and linger on the delicate finish.
10.95 Glass || 28 Bottle

Tiziano Chianti, Italy

An elegant wine with hints of spice and dark berries.
8.95 Glass || 32 Bottle

Principato Pinot Noir, Italy

Well-structured wine with berries and fruit flavors.
9.95 Glass || 36 Bottle

Kendall Jackson, Cabernet Sauvignon, CA

Aromas of lush black cherry, blackberry and cassis with notes of cedar and vanilla.
9.95 Glass || 32 Bottle

F. Coppola Merlot, CA

A vibrant merlot with luscious plum and red raspberry flavors.
9.95 Glass || 36 Bottle

ROSE

Chateau Ste Michelle Rose, WA

Dry, crisp and elegant.
8.95 Glass || 32 Bottle

HOUSE

Coastal Vines, CA

Chardonnay 7.50 Glass || 25 Bottle
Cabernet 7.50 Glass || 25 Bottle



EST. APR 21 PM 3:40 AZD LLC

Happy Hour Menu
3PM - 7PM
Bar or Patio only

Starters

Calamari

Golden fried calamari, served with tzatziki and marinara sauce 10.95

Greek Fries

French fries topped with crumbled feta and oregano 5.95

Chicken Wings

Marinated and fried. Served with side of marinara 11.95

Greek Nachos

Fried pita topped with gyro meat, onions, tomatoes, feta. Served with side of tirokafteri and tzatziki 9.95

Side Salad

Greek, Caesar, or Green 3.95

Zucchini Cakes

Lightly battered and fried to golden perfection. Served with marinara 7.95

Antipasto Plate

Salami, pepperoni, pepperoncini, Kalamata olives, feta cheese, mixed veggies, pita bread and tirokafteri dip 11.95

Bruschetta

Garlic bread brushed with olive oil, and topped with tomatoes, onions, basil, feta and balsamic glaze 8.75

2 Mini Sliders & Fries

Choice of 2 mini sliders with either Sliced gyro meat, lettuce, tomato, onion and tzatziki 9.95

OR

Beef, sautéed onions, feta cheese, homemade chipotle mayo 10.95

Dips

Served with pita bread. 5.95

Tzatziki

Yogurt,
Cucumber,
Garlic

Hummus

Chickpea,
Garlic,
Tahini

Tirokafteri

Spicy feta, Jalapeno,
Roasted red pepper

Baba Ganoush

Eggplant,
Garlic

Pizza

10" Cheese Pizza

11.95 with 4 toppings
Extra toppings 1.50

Toppings: (1.50 each)

pepperoni, sausage, chicken, beef, gyro meat, bacon, artichoke hearts, green peppers, red peppers, mushrooms, black olives, onions, spinach, pineapple, tomatoes, garlic, feta, jalapeno, pepperoncini

18% Gratuity added to parties of 6+ guests

Consuming raw or undercooked meat, poultry, seafood, shellfish or eggs may increase your chance of foodborne illness.

Drinks!

251 HR 21 PM 3:40 AZDILLC

Cocktails

7.95

Blueberry Cosmo

Vodka, blueberry simple syrup, triple sec, splash cranberry, blueberries

Godiva Chocolate Martini

Stoli vanilla vodka, chocolate liqueur, chocolate sauce

Manhattan

Bourbon, sweet vermouth, bitters, cherry juice

Martini

Vodka or gin, dry vermouth, olives or lemon twist

Berry Margarita

Tequila, berry simple syrup, lime juice, sweet and sour, orange bitters

Santorini Sangria

Sweet red Greek wine, peach schnapps, pomegranate, sprite, orange juice

Beer on Tap

16 oz

Bud Light	4.25	Beer(s) of the Month	5.25
Michelob Ultra	4.50	Stella Artois	4.75
Blue Moon	4.75	Dos XX Lager	4.75
Peroni	4.75	805	4.75
Space Dust	4.75	Kilt Lifter	4.75

Bottled Beer

Budweiser 4.25	Michelob Ultra 4.50	Guinness 5.75
Bud Light 4.25	Heineken 5.75	Fix Greek Lager 5.25
Coors Light 4.25	Corona 5.75	Mythos 5.25
Miller Lite 4.25	Dos XX Amber 5.25	Angry Orchard 5.75
O'Doul's 4.25	Heineken 0.0 5.25	Fat Tire 5.25

Wines

Red Wine Favorites

Josh Red Blend, CA 8.95
Antinori Santa Christina Red Blend, Italy 9.95
Kendal Jackson Cabernet, CA 8.95
Coastal Vines Cabernet 5.50
Coastal Vines Merlot 5.50
Coppola Merlot 6.50

White Wine Favorites

Principato Pinot Grigio, Italy 8.95
Kendall Jackson Sauvignon Blanc, CA 8.95
Coastal Vines Chardonnay 5.50

Rosé

Chateau Ste Michelle Rose 7.95

DINO'S

25 MAR 21 PM 3:39 AZD LLC

GREEK & ITALIAN GRILL



Children's Menu

Coke, Diet Coke, Cherry \$1.95
Coke, Sprite, Root Beer,
Lemonade, Raspberry Tea,
Dr. Pepper

Shirley Temple \$2.25

Milk or Chocolate Milk \$2.50
(no refills)

Apple Juice (no refills) \$2.50

2 Chicken Strips w/ Fries \$7.50

Spaghetti w/ Meatball \$6.95

Fettuccini Alfredo \$6.95

Hamburger w/ Fries \$6.95

Cheeseburger w/ Fries \$7.95

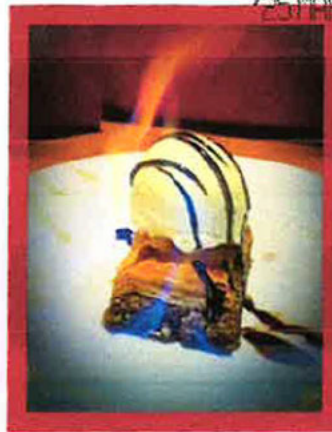
Mixed Green Salad \$3.95

Ice Cream \$2.95



Baklava

Layers of filo pastry, spiced honey sauce, and chopped nuts.
\$8.95



Flambe Baklava

Our traditional baklava served with a scoop of vanilla ice cream and then topped with rum and set aflame.
\$9.95



Chocolate Mousse

Light and fluffy chocolate that melts in your mouth.
\$8.95



Limoncello

Refreshing lemon gelato swirled together with limoncello.
\$8.95



New York style crust. Order it p
carc

Dino's Catering Menu

Appetizers	Small 8-12ppl	Large 20-25ppl
Dips: (Each dip sold separately; pita not included) Hummus: Chickpea puree mixed with garlic, tahini, and fresh lemon juice. Tzatziki: Yogurt, cucumber, garlic, and dill. Tirokafteri: Spicy feta, jalapeno, olive oil, and roasted red pepper. Baba Ganoush: Roasted eggplant, garlic, olive oil, and fresh lemon juice.	\$24	\$48
Bruschetta: Our homemade garlic bread topped with tomatoes, onions, basil, feta cheese, and balsamic vinaigrette drizzled on top.	\$46	\$85
Dolmathes: Grape leaves stuffed with seasoned ground beef and rice topped with a lemon dill sauce.	\$2.00 each	
Spanakopita: Spinach, feta, onion, and fresh herbs wrapped in filo dough.	6"x4"	\$8.49 each
Salads (ask about adding chicken, salmon, shrimp, or gyro meat to salads)	Small 8-12ppl	Large 20-25ppl
Organic Mixed Greens: Mixed greens topped with tomato and cucumber. Choice of dressing.	\$42	\$67
Greek Salad: Romaine lettuce topped with tomatoes, onions, cucumbers, green peppers, feta cheese, and Kalamata olives. Choice of dressing.	\$60	\$110
Mediterranean Salad: Romaine lettuce topped with tomatoes, onions, mozzarella cheese, black olives, and artichoke hearts. Choice of dressing.	\$60	\$110
Caesar Salad: Romaine lettuce, croutons, parmesan cheese and Caesar dressing.	\$50	\$95
Antipasto Salad Romaine lettuce, tomatoes, red bell peppers, onions, salami, pepperoncini, mozzarella cheese, and black olives with choice of dressing.	\$65	\$120



Arizona Dept. of Liquor Licenses and Control

<https://www.azliquor.gov>

(602) 542-5141

251111R21 111340 AZDILC

DLLC USE ONLY

Fee:

Job #:

Date Accepted:

CSR:

Personal Information Questionnaire

805-574 FP current 08-16-2024

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

- Name: Katsaros Konstantinos
- Social Security #: [REDACTED] Birth Date: [REDACTED]
(NOT a public record) (NOT a public record)
- Driver's License #: [REDACTED] State Issued: AZ
(NOT a public record)
- Are you a resident of Arizona? ☒ Yes ☐ No Date of residency: 07/01/2007
- Email address: dino_katsaros@yahoo.com
- Home Address: [REDACTED]
- Daytime phone #: 206-335-5191 Alternative phone #: 480-273-2635

SECTION 2 - LICENSED BUSINESS INFORMATION

- Liquor License #: 12079073
- Business Name (doing business as): Dino's Greek & Italian
- Business Address: 1550 N Dysart Rd Ste B7, Goodyear AZ 85345

SECTION 3 – DAY TO DAY OPERATION OF BUSINESS

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: Konstantinos Katsaros +
Alexandra Katsaros + Konrad Dixon

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
*Administrative Law Violations are any civil penalties, fines, suspension, or revocations of your liquor license. Yes ☐ No ☒
5. Has anyone EVER obtained a judgement against you the subject of which involved fraud or misrepresentation? Yes ☐ No ☒

I, (Print Full Name) Konstantinos Katsaros 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: [Signature] Date: 12/6/24



ALIEN STATUS

Arizona Dept. of Liquor Licenses and Control
800 W. Washington St. 5th Floor Phoenix, AZ 85007
(602) 542-5141

Type or Print with Black Ink

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) Konstantinos Katsaros

SECTION II – CITIZENSHIP OR NATIONAL STATUS DECLARATION

Are you a citizen or national of the United States? ☒ Yes ☐ No - If **yes**, indicate place of birth:

City Vancouver State British Columbia COUNTRY Canada

If you answered **Yes, 1)** Attach a legible copy of a document from the list below.

2) Name of document: Drivers 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 DECLARATION

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.

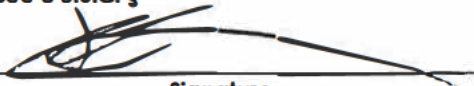
Other Persons (8 U.S.C. § 1621(c)(2)(A) and (C))

- 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. §

Konstantinos Katsaros

Print Name



Signature

3-18-2025

Date

25 MAR 21 PM 3:42 AZD/LC



Certificate # 1jdkgk-k6cd340

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

☒	On-sale
☐	Off-sale
☐	On- and off-sale

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.

The State requires BASIC Title 4 training only as a prerequisite for MANAGEMENT Title 4 training or as a result of a liquor law violation. Persons required to have BASIC Title 4 training are listed at the base of this Certificate. Licensees sometimes require BASIC Title 4 Training a condition of employment.

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

Konstantinos Katsaros

Full Name (please print)

Signature

Mar 18, 2025

Training Completion Date

Mar 17, 2028

Certificate Expiration Date
(three years from completion date)

Training Provider Information

AboveTraining.com

Company Name

711 Timpanogos Pkwy M Ste 3100, Orem UT

Mailing Address

801-494-1416

Daytime Contact Phone Number

I, Kathryn Heil, certify that the above named individual did successfully complete
Instructor Name (please print)

Title 4 BASIC 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).

Kathryn Heil

Instructor Signature

Mar, 18, 2025

Mo Day 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.

Certificate # AZM-ON01207880

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.

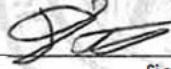
Basic Title 4 training is a prerequisite for MANAGEMENT Title 4 training. A valid Certificate of Completion for BASIC Title 4 training must be on file at the Department of Liquor and satisfactory completion of a State-approved BASIC Title 4 course must be verified by the training provider prior to issuing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

Konstantinos Katsaros

Full Name (please print)



Signature

03/18/2025

Training Completion Date

03/17/2028

Certificate Expiration Date
(three years from completion date)

Training Provider Information

360training.com Inc.

Company Name

6504 Bridge Point Parkway, Suite 100, Austin, TX 78730

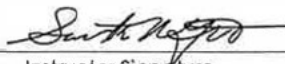
Mailing Address

(877) 881-2235

Daytime Contact Phone Number

I, Samantha Montalbano, 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).



Instructor Signature

03/18/2025

Day Mo Year

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Beer & Wine Bar (series 7)
Hotel/Motel w/restaurant (series 11)
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Arizona Dept. of Liquor Licenses and Control

<https://www.azliquor.gov>

(602) 542-5141

25 MAR 21 PM 3:42 AZD LLC

DLIC USE ONLY

Fee:

Job #:

Date Accepted:

CSR:

Personal Information Questionnaire

905-574 Fp Current 05-16-2024

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)

A.K. ~~AA~~
~~AGENT~~

SECTION - 1 INDIVIDUAL INFORMATION

☒ CONTROLLING PERSON

☐ MANAGER

- Name: Alexandra Katsaros
Last First Mid
- Social Security #: [REDACTED] Birth Date: [REDACTED]
(not a public record)
- Driver's License #: [REDACTED] State Issued: AZ
(not a public record)
- Are you a resident of Arizona? ☒ Yes ☐ No Date of residency: 07/01/2007
- Email address: dinosrest2007@gmail.com
- Home Address: [REDACTED]
- Daytime phone #: 206-371-5313 Alternative phone #: 623-535-8380

SECTION 2 - LICENSED BUSINESS INFORMATION

- Liquor License #: 12079073
- Business Name (doing business as): Dinos Greek & Italian
- Business Address: 1550 N Dysart rd ste B8, Goodyear AZ 85345

SECTION 3 – DAY TO DAY OPERATION OF BUSINESS

25 MAR 21 PM 3 42 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: Constantinos Katsaros
Alexandra Katsaros + Konrad Dixon

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*
**Administrative Law Violations are any civil penalties, fines, suspension, or revocations of your liquor license.* Yes ☐ No ☒
5. Has anyone EVER obtained a judgement against you the subject of which involved fraud or misrepresentation? Yes ☐ No ☒

I, (Print Full Name) Alexandra Katsaros 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: 12/06/24

Certificate # AZB-OFF-01210797

'25 MAR 21 PM 3:42 AZD LLC

☐ On-sale
☒ Off-sale
☐ On- and off-sale

Certificate of Completion
For
Title 4 **BASIC** 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.

The State requires BASIC Title 4 training only as a prerequisite for MANAGEMENT Title 4 training or as a result of a liquor law violation. Persons required to have BASIC Title 4 training are listed at the base of this Certificate. Licensees sometimes require BASIC Title 4 Training a condition of employment.

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

Alexandra Katsaros

Full Name (please print)


Signature

03/20/2025

Training Completion Date

03/19/2028

Certificate Expiration Date
(three years from completion date)

Training Provider Information

360training.com Inc.

Company Name

6504 Bridge Point Parkway, Suite 100, Austin, TX 78730

Mailing Address

(877) 881-2235

Daytime Contact Phone Number

I, Samantha Montalbano, certify that the above named individual did successfully complete
Instructor Name (please print)

Title 4 BASIC 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).


Instructor Signature

03/20/2025

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
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Conveyance (series 8)
Restaurant (series 12)

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

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Beer & Wine Bar (series 7)
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For
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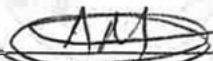
Basic Title 4 training is a prerequisite for MANAGEMENT Title 4 training. A valid Certificate of Completion for BASIC Title 4 training must be on file at the Department of Liquor and satisfactory completion of a State-approved BASIC Title 4 course must be verified by the training provider prior to issuing a Certificate of Completion for MANAGEMENT Title 4 training.

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Student Information

Alexandra Katsaros

Full Name (please print)


Signature

04/22/2024

Training Completion Date

04/22/2027

Certificate Expiration Date
(three years from completion date)

Training Provider Information

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Company Name

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Mailing Address

(877) 881-2235

Daytime Contact Phone Number

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Instructor Name (please print)

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Instructor Signature

04/22/2024

Day Mo Year

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DLLC USE ONLY**Fee:**

Job #:

Date Accepted:

CSR:

Personal Information Questionnaire

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.

A.R.S. §4-202(A).

A.R.S. §4-101(10).

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

SECTION - 1 INDIVIDUAL INFORMATION

AGENT

☐ CONTROLLING PERSON

☒ **MANAGER**

1. Name: Oixon Konrad Gerard
Last First Middle

2. Social Security #: [REDACTED] Birth Date: 01 [REDACTED]
(NOT a public record) (NOT a public record)

3. Driver's License #: [REDACTED] State Issued: AZ
(NOT a public record)

5. Are you a resident of Arizona? ☒ Yes ☐ No Date of residency: 09 / 10 / 2021

6. Email address: K-rad66@yahoo.com

7. Home Address: [REDACTED]

8. Daytime phone #: (623) 466-4815 Alternative phone #: _____

SECTION 2 – LICENSED BUSINESS INFORMATION

1. Liquor License #: _____
2. Business Name (doing business as): Dino's Greek and Italian Grill
3. Business Address: 1550 N Dysart Rd. Goodyear, AZ 85395

SECTION 3 – DAY TO DAY OPERATION OF BUSINESS

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: Konstantinos Katsaros,
Alexandra Katsaros and Konrad Dixon

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 ☒
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A.R.S. §4-202, 4-210
**Administrative Law Violations are any civil penalties, fines, suspension, or revocations of your liquor license.* Yes ☐ No ☒
5. Has anyone EVER obtained a judgement against you the subject of which involved fraud or misrepresentation? Yes ☐ No ☒

I, (Print Full Name) Konrad Dixon 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: Konrad Dixon

Date: 3/19/25



FINGERPRINT VERIFICATION FORM

Arizona Department of Liquor Licenses and Control
800 W. Washington St. 5th Floor Phoenix, AZ 85007
(602) 542-5141

DLIC USE ONLY

Job #:

Date Accepted:

CSR:

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.
Do not give the applicant the fingerprint card without first sealing it inside the envelope.
5. **Write applicants name on front of sealed envelope.**

PRINT the following information:

Date 03/19/25	Name of Applicant: Konrad Gerard Dixon
Name of Fingerprint Technician: Annai Lopez	
Fingerprint technician's Signature: 	
Fingerprint technician's Agency/company Name: The UPS store 4740	Phone Number: (603) 925-4759
Type of Photo ID Provided (check one):	
☒ Driver's License ☐ Passport ☐ Other (Please specify)	

Certificate # _____

25 MAR 21 PM 3:42 AZD LLC

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

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Student Information

Konrad Dixon

Full Name (please print)


Signature

03/19/2025

Training Completion Date

03/18/2028

Certificate Expiration Date
(three years from completion date)

Training Provider Information

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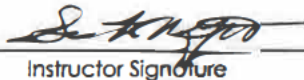
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03/19/2025

Day Mo Year

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☒ On-sale
☐ Off-sale
☐ On- and off-sale

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Student Information

Konrad Dixon

Full Name (please print)

Konrad Dixon

Signature

03/18/2025

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Samantha Montalbano

Instructor Signature

03/18/2025

Day Mo Year

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