

May 5, 2009

HONORABLE MAYOR AND CITY COUNCIL
City of Long Beach
California

RECOMMENDATION:

Receive the supporting documentation into the record, conclude the hearing and either approve or deny the permit for May 16, 2009, with conditions, on the application of DG Boxing Enterprises, Inc., DBA DG Boxing, 4901 E. Carson Street, for a permit for Boxing/Wrestling/Mixed Martial Arts. (District 5)

DISCUSSION

The Long Beach Municipal Code (LBMC) requires an application be filed and a hearing be held before the City Council whenever this type of activity is requested and before a permit is granted or denied.

The LBMC also requires that the City Council make a finding that the conduct of the business will comport with the public health, safety, morals and welfare, and if this is so, they may authorize the Director of Financial Management to issue the permit.

The City Council has the authority to either grant the Permit for the May 16, 2009, amateur boxing exhibition with or without conditions, or deny the Permit on the application.

Attached for your review is the application from DG Boxing Enterprises, Inc., DBA DG Boxing. Also attached are reports from City departments that conducted investigations in accordance with the LBMC. The following summarizes their findings:

- The Police Department recommends that the permit for Boxing/Wrestling/Mixed Martial Arts be approved subject to conditions.
- The Fire Department recommends that the permit for Boxing/Wrestling/Mixed Martial Arts be approved subject to conditions.
- The Health and Human Services Department finds that the building/location meets department requirements for the proposed use, conditioned that the establishment remain in compliance with the Long Beach Noise Ordinance (LBMC Chapter 8.80).

- Development Services has no comments regarding this application, as the proposed activities are to be held at the gymnasium of the Long Beach City College campus, a State entity, and are not within the jurisdiction of the Planning Bureau.

Because amateur boxing exhibitions are subject to California State Athletic Commission rules and regulations, and the Commission is the sole agency authorizing third parties to sponsor and hold amateur events for local boxing clubs, such as DG Boxing, also attached is an April 15, 2009, news release regarding third party sponsor USA Boxing, as well as USA Boxing's authorization to sponsor DG Boxing. The Commission is aware of the proposed May 16, 2009, exhibition, and will be present to monitor the event.

The Department of Financial Management, Business Relations Bureau, having reviewed all submitted department documents and related correspondence received during the investigative process, recommends that City Council either approve or deny the Boxing/Wrestling/Mixed Martial Arts permit, with conditions, for the May 16, 2009, amateur exhibition. In the event any of the recommended conditions attached to any permit(s) or license(s) are in conflict, the permittee shall adhere to the strictest of the applicable conditions.

This item was reviewed by Deputy City Attorney Cristyl Meyers on April 24, 2009.

TIMING CONSIDERATIONS

The hearing date of May 5, 2009 has been posted on the event location, and the applicant has been notified by mail.

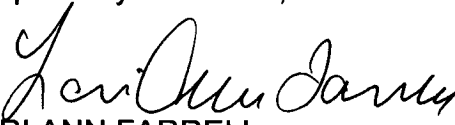
FISCAL IMPACT

The following fees were collected with the application: Building Review \$20 and Zoning Review \$14 (Development Services Department) and Police Investigation \$1,272 (Police Department). The following fees will be collected if the application is approved: Business License \$77.45 and Regulatory \$1,350 (Financial Management Department).


SUGGESTED ACTION:

Approve the recommendation.

Respectfully submitted,


LORI ANN FARRELL
DIRECTOR OF FINANCIAL MANAGEMENT/CFO

APPROVED:


PATRICK H. WEST
CITY MANAGER



CITY OF LONG BEACH

DEPARTMENT OF FINANCIAL MANAGEMENT

333 West Ocean Boulevard • Long Beach, CA 90802 • (562) 570-5700 • Fax (562) 570-6867

Business Relations Bureau

FIVE YEAR HISTORY OF ESTABLISHMENT Long Beach City College, Hall of Champions Gymnasium 5001 Lew Davis Street

DG Boxing Enterprise, Inc.
DBA: DG Boxing
Lic#20906650
02/18/09 – Pending City Council approval

Boxing/Wrestling/Mixed Martial Arts

Topping Inc.
DBA Topping
Lic#20845430
10/14/08 - Active

Boxing/Wrestling/Mixed Martial Arts



CITY OF LONG BEACH

DEPARTMENT OF FINANCIAL MANAGEMENT

333 WEST OCEAN BOULEVARD • LONG BEACH, CALIFORNIA 90802

SUMMARY OF APPLICATION FOR BUSINESS PERMIT

Attached for your review and action is an application for DG Boxing Enterprise, Inc., DBA DG Boxing. Also attached are reports from various departments stating their recommended disposition of the subject application. These are summarized as follows:

SUBMITTED FOR CITY COUNCIL ACTION

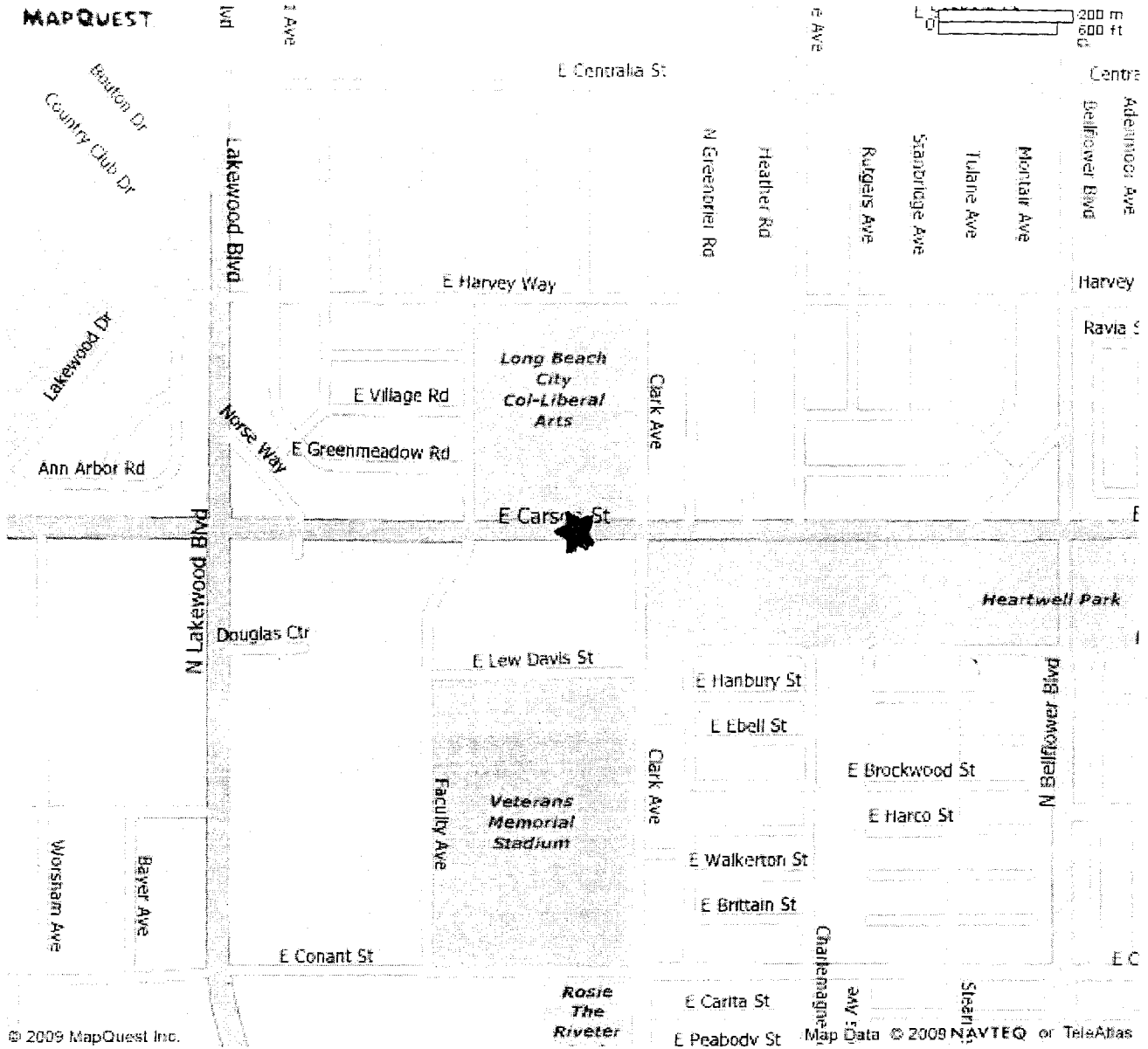
	<u>Without Concern</u>	<u>With Conditions</u>	<u>With Concerns</u>
Police Department		X	
Fire Prevention Bureau		X	
Health and Human Services Department/Noise Control		X	
Development Services Department	X		

Questions concerning the above may be directed to the following:

Police Department, Chief of Police	570-7301
Fire Department, Fire Prevention Bureau	570-2500
Health and Human Services Department, Noise Control	570-4130
Development Services Department.....	570-6623

Compiled by: Department of Financial Management
Business Relations Bureau

4901 E. Carson St., #G DG Boxing





CITY OF LONG BEACH BUSINESS LICENSE APPLICATION

4th Floor, City Hall

333 W. Ocean Boulevard, Long Beach, CA 90802

www.longbeach.gov

(562) 570-6211

TDD (562) 570-6793

GENERAL INFORMATION

OWNER'S NAME (If corporation, use corporate name. If partnership - principal) DG Boxing Enterprises	DRIVER'S LICENSE NUMBER	STATE	SOCIAL SECURITY NUMBER
BUSINESS NAME (D.B.A.) <i>same as ab DG Boxing</i>	TYPE OF BUSINESS (Be specific) boxing gym		HOME OCCUPATION <input type="checkbox"/>
BUSINESS ADDRESS 560 E. 4th St # 4B	CITY	STATE CA	ZIP 90814
MAILING ADDRESS (if different) Long Beach City College	CITY	STATE CA	ZIP 90808
RESIDENCE ADDRESS (if different) 4901 E. Carson St. G-9 LB	CITY	STATE CA	ZIP 90808
LIST OF PRINCIPAL OFFICERS' OR PARTNERS' NAMES AND ADDRESSES		TITLE	PERCENT OWNERSHIP
[REDACTED]		president	50%
[REDACTED]		vice-president	50%

New Business Address Change Ownership Change Secondary License Sole Owner Partnership Corporation L.L.P. L.L.C.

BUSINESS OPERATIONS INFORMATION

START DATE 5-16-09	NO. OF EMPLOYEES 2	NO. OF VEHICLES 0	FEDERAL TAX ID NUMBER [REDACTED]	SALES TAX (SELLER'S PERMIT) NUMBER
Does your business have a Calif State Lic? <input type="checkbox"/> Y <input type="checkbox"/> N		STATE LICENSE NUMBER	CLASSIFICATION(S)	RENEWAL DATE

FOOD / ALCOHOL / ENTERTAINMENT

SERVICES / FUND RAISING

Do you plan to sell or serve food? (including pre-packaged) <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Will you provide a towing service? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N
If selling food, are there more than 10 square feet of food products displayed? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Will you offer massage, bodywrap, escort or other similar personal services? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N
If serving food, how many seats? _____	Will you engage in fund raising? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N
Do you plan to sell or serve alcoholic beverages? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Will you deal in coins, stamps, firearms, jewels, or second-hand property? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N
If yes, ABC License number: _____	HAZARDOUS MATERIALS / MEDICAL WASTE
Does your business involve amusement machines, video games and/or pool tables? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Will you use, store, or transport chemicals (new or waste state)? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N
How many: _____ Type: _____	Will you manage or produce biohazardous materials or waste? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N
Does your business have vending machines? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	BUILDING AND FACILITY INFORMATION
How many: _____ Type: _____	Business sq. ft.: _____
Will you have: <input type="checkbox"/> dancing, <input type="checkbox"/> music (live or amplified)?	Do you <input type="checkbox"/> own or <input checked="" type="checkbox"/> rent/lease your business property? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N
	Does your business require construction and/or remodeling? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N

ACKNOWLEDGMENT

I have received a copy of "OPERATING A BUSINESS IN LONG BEACH". I understand that before I can operate my business in Long Beach, my establishment must comply completely or I will be in violation of the L. B. M. C., Section 3.80.421.5. I declare, under penalty of perjury, that I am authorized to complete this application. To the best of my knowledge and belief, the provided information and statements are true and correct.

SIGN and return this statement with your remittance. Make checks payable to City of Long Beach

DG Boxing Enterprises Owner or Authorized Agent

by: *David Gonzalez* SIGNATURE DATE *2-18-09* PRINT NAME/TITLE **David Gonzalez - president**

DO NOT WRITE BELOW THIS LINE

Review Path: <input type="checkbox"/> Min <input type="checkbox"/> Mod <input type="checkbox"/> Com	Inspection(s): <input type="checkbox"/> Bldg <input type="checkbox"/> Fire <input type="checkbox"/> Hlth <input type="checkbox"/> PD <input type="checkbox"/> Oth	Date/time: _____	Init: _____
Basic Tax	Prev Use: _____	Exp Date: _____	
Employees # _____ @ \$ _____	Prev Lic: _____	Exp date: _____	
Vehicles # _____ @ \$ _____	Exp date: _____	District: 20	
Other # _____ @ \$ _____	District: 30054	SIC: 7999	
DPIA, BSPA, BKBA base	Entered by: _____	Date: 1/8/09	
PIA Employees # _____ @ \$ _____	Date: 1/8/09	BU: 20906050	
Regulatory		Zoning Review <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A	
Investigation		By: <i>[Signature]</i>	
Misc. Fees		Date: 2-18-09	
Sub Total		<input type="checkbox"/> New construction <input type="checkbox"/> Reuse	
Zoning		Zone: I	
Building Inspection		Comments: We have no jurisdiction be this application	
Total			

NOTE: THIS IS NOT A BUSINESS LICENSE: DO NOT OPERATE UNTIL A VALID LICENSE HAS BEEN ISSUED. THIS INFORMATION IS AVAILABLE IN AN ALTERNATIVE FORMAT BY CONTACTING 562/570-6211



OFFICE USE ONLY

Accepted By: [Signature] Date: 2/18/08
 Zoning Approval By: [Signature] Date: 2-18-09

APPLICATION FOR BOXING/WRESTLING PERMIT

(Please Print All Information - Incomplete Applications Will Not Be Accepted)

Applicant's Name (Legal Ownership Structure): DG Boxing Enterprise Inc.

Business Name (DBA): DG Boxing Business Phone: (562) 988-2454

Business Site Address: Long Beach City College 4901 E. Carson St. Long Beach, CA 90808
5660 E. Pacific Coast Hwy E, LB-90814

Date Business Proposes To Open: May 16, 2009

Days & Time Premises Are Open For Inspection: Long Beach City College

Proposed Use(s):

Boxing Professional Amateur Mock
 Wrestling Professional Amateur Mock

Explain briefly the proposed use of the rooms within the building:
USA Amateur boxing competition

Contact Person(s) Name (authorized agent, manager, etc.): Mark Meng - Business Manager

Contact Person(s) Phone Number: (562) 234-6348

Type of Organization:

Corporation Partnership Individual Unincorporated Association or Club
 Trust LLC Other, explain: _____

OFFICE USE ONLY

Building Fire Health (Check Inspecting Department) Date Received: _____
 Building/Location meets Department Requirements for the proposed use.
 Building/Location meets Department Requirements for the proposed use subject to the following conditions:

 Building/Location does not meet Department requirements for the proposed use.
 Inspection Completed On (date): _____ By: _____

POLICE DEPARTMENT

Police Department finds no for basis for denial Police Department finds basis for denial
 Police Department finds no for basis for denial with conditions

Conditions or Basis for Denial: _____

By: _____ Title: _____ Date: _____

GENERAL APPLICATION (ALL APPLICANTS)

Principal place of business (if other than the address listed on page 1): _____

Fictitious business names(s) or dba(s) used: DG Boxing

Place and date of filing fictitious business name statement: Norwalk, CA, 2000

County(ies) in which fictitious name statement is (are) filed: LA County

Names and address of all agents and employees authorized to negotiate or otherwise represent individual in connection with any transaction with the City of Long Beach:

David Gonzales

Jose Luis Gonzales

Mark Meng

Name and address of person (agent) authorized to accept service of process in California:

David Gonzales, 5660 E. Pacific Coast Hwy #1C, LB 90814

State whether you are licensed by any governmental agency to engage in any business. If so, list each such license held, the city in which held, and expiration date thereof:

Business Lic, City of Long Beach, exp. 8-15-08

Is this applicant a subsidiary of a present corporation or business?
If yes, explain:

YES

NO

How long has the corporation or business been in operation? Since 2000 (8yrs)

Is the location: Owned? Rented/Leased?

If Rented/Leased, state the name and address of property owners:

Name: The Long Beach City College

Address: 4901 E. Carson St. B-9

Long Beach, CA 90808

IF APPLYING AS A CORPORATION

Check One Box:

For-Profit Corporation

Non-Profit Corporation

(If a Non-Profit Corporation, please attach copies of both State and federal Tax Exemption Certificates)

Name of Corporation: of DG Boxing Enterprise Inc.

Corporation Number: [REDACTED]

Date and Place of Incorporation: 4-21-03, Long Beach, CA

Location Headquarters: Long Beach, CA

Please attach certified copies of Articles of Incorporation and By-Laws, and all amendments thereto this application.

Name and Residence Address of Corporation Officers (members of the executive board):

Name	Title	Address	Telephone
[REDACTED]	President	[REDACTED]	[REDACTED]
[REDACTED]	Vice President	[REDACTED]	(5) [REDACTED]
			()
			()

Numbers of shares issued by Corporation: 2,000
Number of share retained by Corporation: 0

Name and addresses of shareholders, if ten (10) or less state also the number and type of shares:

[REDACTED]
[REDACTED]
Beach, CA 90808 52

Name and address of agent for service of process designated by Corporation with the Secretary of State of California:

David Gonzales, 5660 E. Pacific Coast Hwy #C,
Richard Allen Jorgensen Long Beach 90814
Lee A. Wood + Assoc.
695 Town Center Drive
Costa Mesa, CA 92626 714-384-6573

GENERAL OPERATING CONDITIONS – COMPLETE EACH QUESTION

ALCOHOL/FOOD/ADDITIONAL BUSINESSES

1. Will liquor be sold or consumed on the premises? YES NO
a. If Yes, complete the following box:

Check one box to indicate License Type	Alcohol Beverage Control License No.	Premises Type: (Club (restaurant) or Commercial (store))
On sale beer <input type="checkbox"/>	_____	_____
On sale beer and wine <input type="checkbox"/>	_____	_____
On sale distilled spirits <input type="checkbox"/>	_____	_____

2. Is a bonafide-eating place provided on the premises? (*Bonafide eating place means a place which is regularly used for serving meals for compensation, which has suitable kitchen facilities containing conveniences for cooking an assortment of foods for ordinary meals other than fast foods, sandwiches or salads. The kitchen must contain proper refrigeration for food and must comply with all applicable regulations of the Health and Human Services Department.*) YES NO

- a. If yes, list types of food sold: _____
b. If no, list any products (such as snacks sold): _____

3. Are non-alcoholic beverages sold? YES NO
4. How many tables for seating? _____

5. Are other types of businesses conducted on the premises? YES NO
a. If yes, list type(s): _____

6. Are pool tables provided? YES NO
a. If yes, indicate number: _____

7. Is there a license for the pool table? YES NO
a. If yes, license number: _____

8. Are amusement machine(s) and/or jukebox(es) provided? YES NO
a. If yes, indicate number and type: _____ Amusement Machines _____ Jukebox(es)

9. Is there a license for the amusement machine(s) and/or jukebox(es)? YES NO
a. If yes, decal number(s): _____

10. Owner of machine(s) and/or jukebox(es):
Name: _____
Address: _____
Telephone No. () _____

GENERAL OPERATING CONDITIONS (CONT.) - COMPLETE EACH QUESTION

SECURITY

11. Will security officers be provided? YES NO
 a. If yes, number of security officers: 8 Gold Shield
12. Is any other type of security provided? YES NO
 a. If yes, describe type of security: _____

Days and hours security officers or other security will be provided (fill out completely):

Day	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Hours of						6pm	6pm DL
Security						10pm	10pm DL

13. Will a private security firm be used? YES NO
 a. If yes, provide the following information of the contracted security firm:
 Name: GoldShield City Business License No.: ~~PPC 6815~~ DL
 Address: 12881 Knott St. #231 Telephone No.: (714) 892-3245
Garden Grove, CA 92841

ADMISSION and/or MEMBERSHIP FEES CHARGED

14. Will minors be allowed on the premises? YES NO
15. Will the premises be open to the general public? YES NO
16. Will an admission fee be charged? YES NO
 a. If yes, fee schedule: \$10 - 35
-
17. Is there a private area for exclusive use of members and their guests only? YES NO
 a. If yes, types of membership fees: _____
-
18. Will guests of members pay an admission fee or other charges? YES NO
 a. If yes, describe the fee schedule and other charges: Its the same for everyone.

GENERAL OPERATING CONDITIONS (CONT.) – COMPLETE EACH QUESTION

HOURS OF OPERATION

Establishment hours of operation by day (fill out completely):

Day	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Open						6 pm	
Close						10 pm	

PROXIMITY OF BUSINESSES AND RESIDENCES

19. Are there surrounding businesses?

YES NO

a. What type? _____

20. Are there surrounding residences?

YES NO

a. Approximately how close? _____

Across the street

PARKING FACILITIES AND ARRANGEMENTS

21. Is parking available?

YES NO

a. If no, what is the street address of the off-premises parking facility? _____

b. Describe the business arrangement made with owner of the parking facility if not part of business premises.
(Please attach a copy of parking contract or deed restriction)

facility

Part of business

c. Days and hours parking facility will be available:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
From						2 pm	
To						10 pm	

d. How many individual parking spaces (approximately)? 2,000

END OF GENERAL OPERATING CONDITIONS SECTION – PLEASE CONTINUE TO NEXT SECTION

BOXING/WRESTLING FACILITY AND ACTIVITY

Boxing

Wrestling

Martial Arts/Other

DW

Business Name: DG Boxing

Business Address: 4320 Atlantic Ave. Suite 23
Long Beach City Calif. 4901 E. Canal St. 90808

Does the Proposed Activity have:

- Outdoor Boxing/Wrestling? Y N
- Mock Boxing/Wrestling as defined by LBMC Section 5.24.150? Y N
- Adult Entertainment as defined by LBMC Section 21.15.110? Y N
- Adult Entertainment as defined by LBMC Section 5.72.115 (B)? Y N
- Permitted or licensed by the State Athletic Commission?
If yes, please attach copy. Y N
- Permitted or licensed by other Committees/Associations?
If yes, please attach copy/explain below. Y N
- Any other type of activity not listed above? Y N

If yes, briefly describe the activity.

USA Amateur Boxing

Boxing Ring? Y N

Stage? Y N

If yes, provide dimensions and type of material of boxing ring. L 20 X W 20 = 400 sq ft.

If yes, provide dimensions and type of material of stage. N/A L _____ W _____ H _____

Describe floor material and surface type:

Canvas over hard foam

(approved boxing ring)

Schedule of boxing/wrestling activity. Please provide days of the week and time of day. If boxing/wrestling is not provided the same days and times every week, please provide a detailed schedule of specific dates and times of boxing/wrestling. Attach an additional sheet if necessary: **(Fill Out Completely)**

Day	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Type						<i>amateur boxing</i>	<i>boxing</i>
Start Time						<i>6⁰⁰</i>	<i>2 pm</i>
End Time						<i>10⁰⁰</i>	<i>10 pm</i>

DW

RELEASE FORM

The undersigned, on behalf of (owner('s)) DG Boxing Enterprises Inc hereby authorizes the City of Long Beach, by and through its appropriate officers, agents and employees to verify and confirm the information contained in this application, and to conduct such other investigations as may be reasonably required by the City of Long Beach, its officers, agents and employees for the purpose of determining the capability, fitness and capacity of:

(DBA) DG Boxing

to obtain the (entertainment type) boxing (USA Amateur boxing) permit/license.

The applicant by signing this application consents service of any notice required or provided for by the laws, rules, regulations, or ordinances of the City of Long Beach upon the person at the address designated in this application as the business address, will constitute sufficient and legal notice. Any change in the person or the address listed in the application may be made only in writing to the Director of Financial Management.

The applicant consents and agrees full compliance will be made with all applicable State laws and City ordinances governing the conduct of the particular type of business activity for which a business license or permit is requested. **The applicant by signing this application understands any incomplete or false information may constitute grounds for denial.**

I swear under penalty of perjury I have read the forgoing application and all information and statements made by the undersigned/applicant regarding this applicant are true and correct.

by: DG Boxing Enterprises
David Gonzalez (SIGNATURE OR AUTHORIZED AGENT) president (TITLE) 2-17-09 (DATE)
David Gonzalez - president

[REDACTED] DRIVER'S LICENSE OR ID CARD NUMBER
CA STATE

[Signature] ACCEPTED BY (CITY STAFF) CSR III TITLE 2/18/09 DATE

State of California
Secretary of State



I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

That the attached transcript of 1 page(s) was prepared by and in this office from the record on file, of which it purports to be a copy, and that it is full, true and correct.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of

July 29 2008

Debra Bowen

DEBRA BOWEN
Secretary of State

2513481

ARTICLES OF INCORPORATION OF
DG BOXING ENTERPRISES

^{up}
FILED
In the office of the Secretary of State
of the State of California

APR 21 2003

Kevin Shelley
KEVIN SHELLEY, SECRETARY OF STATE

I

The name of this corporation is DG BOXING ENTERPRISES.

II

The purpose of this corporation is to engage in any lawful act or activity for which a corporation may be organized under the General Corporation Law of California other than the banking business, the trust company business or the practice of a profession permitted to be incorporated by the California Corporations Code.

III

The name and address in the State of California of this corporation's initial agent for service of process is: Richard Allen Jorgensen, Law Offices of Lee A. Wood & Associates, 695 Town Center Drive, Costa Mesa, CA 92626.

IV

This corporation is authorized to issue only one class of shares of stock; and the total number of shares which this corporation is authorized to issue is 10,000.

DATED: 4/21/03

[Signature]
RICHARD ALLEN JORGENSEN
LEE A. WOOD & ASSOCIATES
695 Town Center Drive
Costa Mesa, CA 92626
(714) 384-6573



This page is part of your document - DO NOT DISCARD



20081353294

Pages:
002



Recorded/Filed in Official Records
Recorder's Office, Los Angeles County,
California

Fee: 23.00

Tax: 0.00

Other: 0.00

Total: 23.00

07/29/08 AT 09:50AM

2170475 200807290500007 Counter

TITLE(S) : FICTITIOUS NAME STATEMENT



L E A D S H E E T

Assessor's Identification Number (AIN)

To be completed by Examiner OR Title Company in black ink.

Number of AIN's Shown

EX-1000

THIS FORM IS NOT TO BE DUPLICATED

YOUR RETURN MAILING ADDRESS

NAME: David Gonzalez
ADDRESS: 5660 E. Pacific Coast Hwy, #C
CITY: Long Beach
STATE: CA ZIP CODE: 90814

LOS ANGELES REGISTRAR-RECORDER/ COUNTY CLERK

07/29/08



20081353294

FICTITIOUS BUSINESS NAME STATEMENT

TYPE OF FILING AND FILING FEE (Check one)

- Original- \$23.00 (FOR ORIGINAL FILING WITH ONE BUSINESS NAME ON STATEMENT) New Filings- \$23.00-
- Refile- \$18.00 (NO CHANGES IN THE FACTS FROM ORIGINAL FILING) (CHANGES IN FACTS FROM ORIGINAL FILING-REQUIRES PUBLICATION)
- \$4.00- FOR EACH ADDITIONAL BUSINESS NAME FILED ON SAME STATEMENT, DOING BUSINESS AT THE SAME LOCATION \$4.00- FOR EACH ADDITIONAL OWNER IN EXCESS OF ONE OWNER

The following person(s) is (are) doing business as:

*1. DG Boxing 2. _____
Print Fictitious Business Name(s)

** 5660 E. Pacific Coast Hwy, #C | _____
Street address of principal place of business Mailing address if different

Long Beach CA 90814 Los Angeles
City State Zip COUNTY City State Zip

Articles of Incorporation or Organization Number (if applicable): AI #ON _____

*** REGISTERED OWNER(S):

<p>1. <u>DG Boxing Enterprises, Inc</u> <small>Full Name/Corp/LLC</small></p> <p><u>5660 E. Pacific Coast Hwy, #C</u> <small>Residence Address (P.O. Box not accepted)</small></p> <p>_____ <small>City State Zip</small></p> <p>_____ <small>If Corporation or LLC - Print State of Incorporation/Organization</small></p>	<p>2. _____ <small>Full Name/Corp/LLC</small></p> <p>_____ <small>Residence Address (P.O. Box not accepted)</small></p> <p>_____ <small>City State Zip</small></p> <p>_____ <small>If Corporation or LLC - Print State of Incorporation/Organization</small></p>
<p>3. _____ <small>Full Name/Corp/LLC</small></p> <p>_____ <small>Residence Address (P.O. Box not accepted)</small></p> <p>_____ <small>City State Zip</small></p> <p>_____ <small>If Corporation or LLC - Print State of Incorporation/Organization</small></p>	<p>4. _____ <small>Full Name/Corp/LLC</small></p> <p>_____ <small>Residence Address (P.O. Box not accepted)</small></p> <p>_____ <small>City State Zip</small></p> <p>_____ <small>If Corporation or LLC - Print State of Incorporation/Organization</small></p>

IF MORE THAN FOUR REGISTRANTS, ATTACH ADDITIONAL SHEET SHOWING OWNER INFORMATION

**** THIS BUSINESS IS CONDUCTED BY: (Check one)

- an Individual a General Partnership a Limited Partnership a Limited Liability Company
- an Unincorporated Association other than a Partnership a Corporation a Trust Copartners
- Husband and Wife Joint Venture State or Local Registered Domestic Partners a Limited Liability Partnership

***** The registrant commenced to transact business under the fictitious business name or names listed above on N/A
(Insert N/A above if you haven't started to transact business)

I declare that all information in this statement is true and correct.
(A registrant who declares as true information which he or she knows to be false is guilty of a crime.)

REGISTRANT(S)/CORP/LLC NAME (PRINT) DG Boxing Enterprises, Inc. TITLE President

REGISTRANT SIGNATURE David Gonzalez

If corporation, also print corporate title of officer. If LLC, also print title of officer or manager.

This statement was filed with the County Clerk of LOS ANGELES on the date indicated by the filed stamp in the upper right corner.
NOTICE - IN ACCORDANCE WITH SUBDIVISION (a) OF SECTION 17920, A FICTITIOUS NAME STATEMENT GENERALLY EXPIRES AT THE END OF FIVE YEARS FROM THE DATE ON WHICH IT WAS FILED IN THE OFFICE OF THE COUNTY CLERK, EXCEPT, AS PROVIDED IN SUBDIVISION (b) OF SECTION 17920, WHERE IT EXPIRES 40 DAYS AFTER ANY CHANGE IN THE FACTS SET FORTH IN THE STATEMENT PURSUANT TO SECTION 17913 OTHER THAN A CHANGE IN THE RESIDENCE ADDRESS OF A REGISTERED OWNER. A NEW FICTITIOUS BUSINESS NAME STATEMENT MUST BE FILED BEFORE THE EXPIRATION.

THE FILING OF THIS STATEMENT DOES NOT OF ITSELF AUTHORIZE THE USE IN THIS STATE OF A FICTITIOUS BUSINESS NAME IN VIOLATION OF THE RIGHTS OF ANOTHER UNDER FEDERAL, STATE, OR COMMON LAW (SEE SECTION 14411 ET SEQ., BUSINESS AND PROFESSIONS CODE).
I HEREBY CERTIFY THAT THIS COPY IS A CORRECT COPY OF THE ORIGINAL STATEMENT ON FILE IN MY OFFICE.

DEAN LOGAN, LOS ANGELES COUNTY CLERK

BY: _____ Deputy



United States Amateur Boxing, Inc.
The national governing body for Olympic-style boxing in the United States
1 Olympic Plaza, Colorado Springs, CO 80909
(719) 866-4506

United States Amateur Boxing, Inc. (USA Boxing) is pleased to have you a non-athlete member. USA Boxing is dedicated to the advancement and promotion of Olympic-style boxing in the United States, and your efforts and contributions as a member are the driving force behind this great sport and organization.

Your non-athlete membership entitles you to: a rule book, sports accident insurance (secondary coverage), a quarterly publication, a membership card and a patch. Membership also entitles you to participate in the many programs offered by your Local Boxing Committee (LBC) and the national organization, such as seminars, clinics and events.

Your membership and benefits start the day you register and expire on Dec 31. Check with your LBC to find out what opportunities are available. For more information about USA Boxing, check out our website at www.usaboxing.org.



USA BOXING
United States Amateur Boxing, Inc.

www.usaboxing.org

DAVID GONZALEZ

is a member of United States Amateur Boxing, Inc.
in good standing for the membership year ending
12/09 as a:

COACH 12/05

Member # 2965130335 SOUTHERN CALIF. LBC

Fold at perforations to detach and keep in safe place.



958-2454 FAX

5-16-09

29-33-02

United States Amateur Boxing, Inc.

PRIVATE ST
PAID # 500

Sanction Application/Official Sanction Form

A Copy of this Sanction must be displayed in the weigh-in room or other conspicuous place

USA Boxing, SOCAL

Local Boxing Committee (LBC) Name

THIS FORM MUST BE COMPLETED IN ITS ENTIRETY

The LBC must forward a copy of this form to USA Boxing's Headquarters.

I(We) DAVID GONZALES Address 3520 GREENBRIEK

City LONG BEACH State CA Zip 90808

Apply on behalf of DG BOXING ENTERPRISES for sanction to hold boxing competition in

City LONG BEACH State CA Zip 90808

Official Name of Event BOXING SHOW

Site LONG BEACH CITY COURSE-VET. STADIUM Address 9901 E. CARSON ST

City LONG BEACH State CA Zip 90808

Time 7 PM on the 16 day(s) of MAY 2009

Sponsoring Organization LEUKEMIA & LYMPHOMA SOCIETY, INC.

Type of Event (Circle One)

LBC Tournament, Golden Gloves Tournament, Regional Tournament, Club Competition Other _____

International Club Competition (name country involved) _____

Level of Competition (Circle One) Senior Junior Olympic Joint Scheduled # of Bouts 12

Official in Charge of Event IRMA ORTIZ

Ringside Physician(s) Name(s) TBA

Volunteer Physician(s)

Paid Physician(s)

I agree to comply with conditions as listed on the reverse side of this form and USA Boxing's Rules and Policies

Applicant's Signature DAVID GONZALES Date 2-10-09

Do Not Write Below This Line

For Local Boxing Committee Use Only

Approved/Rejected (Circle One)-Signed _____ Date 2-10-09

LBC President or Director

LBC Name SOCAL

Sanction Number 29-33-02A

--over--

USA BOXING, S. Calif. Assn.
Richard S. Jones
21392 Breton Lane
Huntington Bch CA 92648-7130

2009 SANCTION
EST # 276 - CLUB SUMMIT

STATE OF CALIFORNIA



DEPARTMENT OF CONSUMER AFFAIRS

California State Athletic Commission

2005 Evergreen Street, Suite 2010

Sacramento, CA 95815

www.dca.ca.gov/csac/

(916) 263-2195 FAX (916) 263-2197

**FOR IMMEDIATE RELEASE**

April 15, 2009

Contact: Luis Farias (916) 826-6069

**Statement by California State Athletic Commission
Assistant Executive Officer Bill Douglas***Amateur Boxing in California*

On Monday, April 13, 2009, the California State Athletic Commission (CSAC) lifted its suspension of USA Boxing's ability to hold amateur events in California conditioned on USA' Boxing's complete cooperation with its inspectors, who will monitor every USA Boxing event for the next two months, and will report back to CSAC with recommendations at the end of that period. The decision ends a nearly three-week suspension imposed by CSAC, during which time sixteen previously sanctioned events were cancelled in the state.

"The Commission's decision to lift the suspension does not mean the California State Athletic Commission has ended its investigation into the circumstances that resulted in the suspension of USA Boxing's ability to hold amateur boxing events. The Commission's efforts, as always, are focused on the health and safety of California's talented amateur athletes. CSAC does not take this responsibility lightly and will investigate and take appropriate action whenever needed.

"The suspension in March was the result of disturbing reports about improprieties at events sanctioned by USA Boxing, including reports of under aged children, some as young as eight years old, boxing without parental supervision at a USA Boxing amateur card in San Francisco.

"Until this matter is resolved to the Commission's satisfaction, the Commission and USA Boxing have agreed that each event will be monitored by the Commission and that they will work together to coordinate the scheduling of future amateur boxing events. The Commission expects that a plan for new mandatory safety requirements, background checks and improved training for coaches will be presented at the next Commission meeting in June."

#



OFFICE USE ONLY

Accepted By: [Signature] Date: 2/18/09
 Zoning Approval By: [Signature] Date: 2-18-09

APPLICATION FOR BOXING/WRESTLING PERMIT

(Please Print All Information - Incomplete Applications Will Not Be Accepted)

Applicant's Name (Legal Ownership Structure): DG Boxing Enterprise Inc.

Business Name (DBA): DG Boxing Business Phone: (562) 988-2454
 Business Site Address: Long Beach City College 4901 E. Carson St. Long Beach, CA 90808
5660 E. Pacific Coast Hwy # C, LB 90814

Date Business Proposes To Open: May 16, 2009

Days & Time Premises Are Open For Inspection: Long Beach City College

Proposed Use(s):

- Boxing Professional Amateur Mock
 Wrestling Professional Amateur Mock

Explain briefly the proposed use of the rooms within the building:
USA Amateur boxing competition

Contact Person(s) Name (authorized agent, manager, etc.): Mark Meng - Business Manager

Contact Person(s) Phone Number: (562) 234-6348

Type of Organization:

- Corporation Partnership Individual Unincorporated Association or Club
 Trust LLC Other, explain: _____

Building Fire Health (Check Inspecting Department) Date Received: _____

Building/Location meets Department Requirements for the proposed use.

Building/Location meets Department Requirements for the proposed use subject to the following conditions:

Building/Location does not meet Department requirements for the proposed use.

Inspection Completed On (date): _____ By: _____

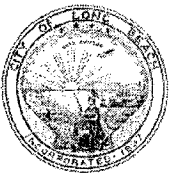
POLICE DEPARTMENT

Police Department finds no for basis for denial Police Department finds basis for denial

Police Department finds no for basis for denial with conditions

Conditions or Basis for Denial: _____

By: [Signature] Title: CHIEF OF POLICE Date: 3/30/09



Date: April 1, 2009
To: Erik Sund, Bureau Manager, Business Relations Bureau
From: Anthony W. Batts, Chief of Police (AWB)
Subject: **APPLICATION FOR BOXING PERMIT – DG BOXING – 5660 EAST PACIFIC COAST HIGHWAY #C**

In response to your request for a recommendation regarding the above named permit application for boxing, the Police Department recommends **approval**, subject to the following ten (10) conditions of operation:

DG Boxing is a boxing gym that provides boxing instruction and self defense classes. The corporation is owned and operated by David and Jose Gonzalez and has been in business for approximately nine years. David Gonzalez holds a valid business license for a fitness center located at 5660 East Pacific Coast Highway #C. DG Boxing will have yearly contests at the Hall of Champions Gym, located at 5001 Lew Davis Street, in the City of Long Beach. The next event is scheduled for May 16, 2009.

The California State Athletic Commission has jurisdiction over all professional and amateur boxing. The California State Athletic Commission may authorize a non-profit club or organization to sanction a contest or show, and for many years has authorized the United States Amateur Boxing Association (USA Boxing) to sanction these events. The permittee is a registered member of the United States Amateur Boxing Association.

The California State Athletic Commission recently took away USA Boxing Association's status as an authorized non-profit club or organization. The permittee is now required to obtain a license from the California State Athletic Commission. Vice Detectives have spoken with the applicant, David Gonzalez, regarding this recent action. He is now in the process of obtaining the proper license from the California State Athletic Commission. The permittee will not be able to hold any contest or show prior to obtaining a license from the California State Athletic Commission. (See Condition #1)

CONDITIONS OF OPERATION

- 1) The Permittee, all participating members, competitors, coaches, assistant coaches, matchmakers, officials, and physicians, must be licensed with the California State Athletic Commission or by an authorized non-profit club or organization before any contest or show. **Failure to provide proof of proper licensing by the State of California or an authorized non-profit organization shall render this permit null and void.**

APPLICATION FOR BOXING PERMIT
DG BOXING – 5660 EAST PACIFIC COAST HIGHWAY #C

- 2) The operation of the establishment shall be limited to those activities and elements expressly indicated on the permit application and approved by the City Council. Any change in the operation, which exceeds the conditions of the approved permit, will require that a new permit application be submitted to the City Council for their review and approval.
- 3) This permit is approved for events to be held only at the Hall of Champions Gym, located at 5001 Lew Davis Street, in the City of Long Beach. A new application must be filed by DG Boxing for any event held at any other location, not less than 90 days prior to the event and must be approved prior to holding any such contest or show.
- 4) The California State Athletic Commission shall have jurisdiction over all professional and amateur boxing, professional and amateur kickboxing, all forms and combinations of full contact martial arts contests, including mixed martial arts, and matches or exhibitions conducted, held, or given within California. (California Business & Professions Code § 18640)
- 5) For amateur boxing, wrestling, and full contact martial arts, the California State Athletic Commission may authorize a non-profit club or organization to sanction a contest or show. (California Business & Professions Code §18646 (a) (b))
- 6) All amateur boxing competitions shall be conducted in accordance with the rules and regulations set forth by the California State Athletic Commission or by an authorized non-profit club or organization.
- 7) Security shall be necessary to prevent violation of law and any other disturbances arising out of, or in connection with, any boxing events. The permittee shall be responsible for ensuring that adequate security is provided at any boxing event. Security guards shall take reasonable measures to ensure that exiting spectators and competitors walk directly to their vehicles, and not loiter in the parking lot or immediate area. The attire of each security guard shall indicate the guard's affiliation by means of a pin, shirt, or other clearly visible form of identification.
- 8) DG Boxing, its promoters, or agents, shall not distribute any advertising matter, such as signs, posters, or promotional cards, in or upon any public property, or in or on any vehicle in any such place in the City. Distribution of any advertising matter upon private property shall adhere to the following guidelines: By placing the same matter in a receptacle, clip, or other device designed or intended to receive advertising matter. The permittee shall keep all promoter contracts, including names, addresses and phone numbers, on file at all times, and must be available for inspection at anytime.

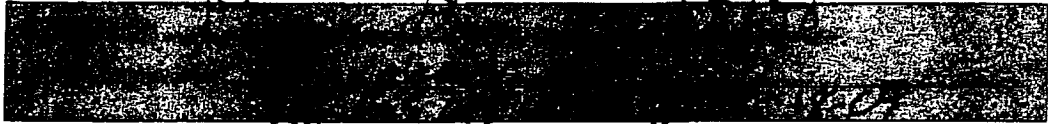
APPLICATION FOR BOXING PERMIT
DG BOXING – 5660 EAST PACIFIC COAST HIGHWAY #C

- 9) All promoters must have or obtain a City of Long Beach Business License prior to conducting activities governed by this permit. The permittee shall be responsible for all activities at the location, including those conducted by promoters. The permittee must also supply any hired promoter with a copy of the approved permit, which shall include a copy of the approved conditions of operation.
- 10) The permittee shall maintain full compliance with all applicable laws, ordinances and stated conditions. In the event of a conflict between the requirements of this permit and any applicable law or ordinance, the more stringent regulation shall apply.

AWB:CNA:cna
AppvlCondDGBoxing



OFFICE USE ONLY



APPLICATION FOR BOXING/WRESTLING PERMIT

(Please Print All Information - Incomplete Applications Will Not Be Accepted)

Applicant's Name (Legal Ownership Structure): DG Boxing Enterprise Inc.

Business Name (DBA): DG Boxing Business Phone: (562) 988-2454

Long Beach City College 4901 E. Carson St. Long Beach, CA 90808
Business Site Address: 5660 E. Pacific Coast Hwy # C, LB 90814

Date Business Proposes To Open: May 16, 2009

Days & Time Premises Are Open For Inspection: Long Beach City College

Proposed Use(s):

- | | | | |
|-----------|---------------------------------------|---|-------------------------------|
| Boxing | Professional <input type="checkbox"/> | Amateur <input checked="" type="checkbox"/> | Mock <input type="checkbox"/> |
| Wrestling | Professional <input type="checkbox"/> | Amateur <input type="checkbox"/> | Mock <input type="checkbox"/> |

Explain briefly the proposed use of the rooms within the building:
USA Amateur boxing competition

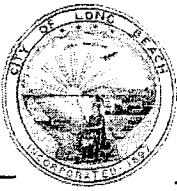
Contact Person(s) Name (authorized agent, manager, etc.): Mark Meng - Business Manager

Contact Person(s) Phone Number: (562) 234-6348

Type of Organization:

- Corporation Partnership Individual Unincorporated Association or Club
 Trust LLC Other, explain: _____

<input type="checkbox"/> Building	<input checked="" type="checkbox"/> Fire	<input type="checkbox"/> Health	(Check Inspecting Department)	Date Received: _____
<input type="checkbox"/> Building/Location meets Department Requirements for the proposed use.				
<input checked="" type="checkbox"/> Building/Location meets Department Requirements for the proposed use subject to the following conditions: <u>PROMOTER AGREES TO ACTIVATE LBFD EMS 911 IN THE EVENT</u> <u>OF INJURY TO PARTICIPANT AND/OR SPECTATOR</u>				
<input type="checkbox"/> Building/Location does not meet Department requirements for the proposed use.				
Inspection Completed On (date): _____		By: _____		
POLICE DEPARTMENT				
<input type="checkbox"/> Police Department finds no for basis for denial		<input type="checkbox"/> Police Department finds basis for denial		
<input type="checkbox"/> Police Department finds no for basis for denial with conditions				
Conditions or Basis for Denial: _____				
By: <u>XAVIER ESPINO</u>	Title: <u>CAPTAIN / FIRE PREV.</u>	Date: <u>4-13-09</u>		



CITY OF LONG BEACH

DEPARTMENT OF HEALTH AND HUMAN SERVICES

100 W BROADWAY STE 400 | LONG BEACH, CA 90802 | 562-570-6513 FAX 562-570-6930

ENVIRONMENTAL HEALTH
NOISE OFFICE

DEPARTMENT OF HEALTH AND HUMAN SERVICES ENTERTAINMENT PERMIT APPLICATION REQUIREMENTS

Date: 2-19-09

Name of Business (DBA): DG Boxing

Name of Business Owner: David Gonzalez + Jose Luis Gonzalez

Business Address: 4320 Atlantic Ave., suite 230
Long Beach, CA 90807

Dear New Business Owners:

The Entertainment establishment must abide by the Long Beach Municipal Code Noise Ordinance, Chapter 8.80.

You must make sure that the noise generating inside your business is not impacting adjacent residences.

If loud music is to be played as part of the entertainment permit, you must also post a sign in the customer area in a conspicuous location that states:

Warning: Sound Levels Within May Cause Permanent Hearing Impairment.

I understand that in order to provide Entertainment, my establishment must comply with the Long Beach Noise Ordinance (LBMC Chapter 8.80)

Owner or Authorized Agent Signature(s) by: ~~David G. DG Boxing~~
David Gonzalez - president

Title president

Phone # 562-988-2454

FAX # 562-988-2452



OFFICE USE ONLY

Accepted By: [Signature] Date: 2/8/08
 Zoning Approval By: [Signature] Date: 2-18-09

APPLICATION FOR BOXING/WRESTLING PERMIT

(Please Print All Information - Incomplete Applications Will Not Be Accepted)

Applicant's Name (Legal Ownership Structure): DG Boxing Enterprise Inc.

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Contact Person(s) Phone Number: (562) 234-6348

Type of Organization:

- Corporation Partnership Individual Unincorporated Association or Club
 Trust LLC Other, explain: _____

OFFICE USE ONLY

Building Fire Health (Check Inspecting Department) Date Received: _____

Building/Location meets Department Requirements for the proposed use.

Building/Location meets Department Requirements for the proposed use subject to the following conditions:

Approved - NO JURISDICTION

Building/Location does not meet Department requirements for the proposed use.

Inspection Completed On (date): _____ By: _____

POLICE DEPARTMENT

- Police Department finds no for basis for denial Police Department finds basis for denial
 Police Department finds no for basis for denial with conditions

Conditions or Basis for Denial: _____

By: _____ Title: _____ Date: _____



Date: March 6, 2008
To: Erik Sund, Manager of Business Relations Bureau
From: Derek Burnham, Current Planning Officer *DB*
Subject: REVIEW OF ENTERTAINMENT LICENSE REQUEST

Site Address: 4901 E. Carson St, #-G
Long Beach, CA 90808

Applicant: DG Boxing Enterprise, Inc.
DBA DG Boxing
4901 E. Carson St, #-G

Zoning District: I (Institutional District)

Proposed Use: Amateur Boxing/Wrestling Competition

The Community Design and Development Division of the Department of Development Services has the following comments:

The applicant is seeking to obtain an entertainment permit for a mixed martial arts sporting event to be held at the gymnasium on the Long Beach City College campus.

As a state entity, proposed activities and uses on the City College campus are not within the jurisdiction of the Planning Bureau. Consequently, the Planning Bureau has no comments regarding this application.

If you have any questions regarding this response, please call Jorge, Ramirez, Planner, at (562) 570-6952.