

4C C1B-2011-00233

ORIGINAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

For the license period beginning _____ 20 _____ ;
ending _____ 20 _____

TO THE GOVERNING BODY of the: Town of }
 Village of } MADISON
 City of }

County of DANE Aldermanic Dist. No. _____ (if required by ordinance)

Applicant's Wisconsin Seller's Permit Number: 456-1027265993-03	
Federal Employer Identification Number (FEIN): 45-0601296	
LICENSE REQUESTED ▶	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$
<input type="checkbox"/> Wholesale beer	\$
<input checked="" type="checkbox"/> Class C wine	\$
<input type="checkbox"/> Class A liquor	\$
<input checked="" type="checkbox"/> Class B liquor	\$
<input type="checkbox"/> Reserve Class B liquor	\$
Publication fee	\$
TOTAL FEE	\$

1. The named INDIVIDUAL PARTNERSHIP LIMITED LIABILITY COMPANY
 CORPORATION/NONPROFIT ORGANIZATION

hereby makes application for the alcohol beverage license(s) checked above.

2. Name (individual/partners give last name, first, middle; corporations/limited liability companies give registered name): RED CORPORATION

An "Auxiliary Questionnaire," Form AT-103, must be completed and attached to this application by each individual applicant, by each member of a partnership, and by each officer, director and agent of a corporation or nonprofit organization, and by each member/manager and agent of a limited liability company. List the name, title, and place of residence of each person.

	<u>PRESIDENT</u>	<u>YIP YIP</u>	<u>534 PLAZA DR. #209 MADISON, WI 53703</u>
President/Member			
Vice President/Member			
Secretary/Member			
Treasurer/Member			
Agent	<u>YIP YIP</u>		
Directors/Managers	<u>TATSIANA ZHYKHAREVICH</u>		

3. Trade Name RED Contemporary Japanese Sushi Bar Business Phone Number _____
4. Address of Premises 106 KING STREET Post Office & Zip Code MADISON, WI 53703

5. Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server training course for this license period? Yes No
6. Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant? Yes No
7. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? Yes No
8. (a) **Corporate/limited liability company applicants only:** Insert state WI and date 03/15/11 of registration.
(b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? Yes No
(c) Does the corporation, or any officer, director, stockholder or agent or limited liability company, or any member/manager or agent hold any interest in any other alcohol beverage license or permit in Wisconsin? Yes No

(NOTE: All applicants explain fully on reverse side of this form every YES answer in sections 5, 6, 7 and 8 above.)

9. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) SEE FLOOR PLAN
10. Legal description (omit if street address is given above): _____
11. (a) Was this premises licensed for the sale of liquor or beer during the past license year? Yes No
(b) If yes, under what name was license issued? HAZE
12. Does the applicant understand they must file a Special Occupational Tax return (TTB form 5630.5) before beginning business? [phone 1-800-937-8864] Yes No
13. Does the applicant understand a Wisconsin Seller's Permit must be applied for and issued in the same name as that shown in Section 2, above? [phone (608) 266-2776] Yes No
14. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign, corporate officer(s), members/managers of Limited Liability Companies must sign.) Any lack of access to any portion of a licensed premises during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license.

SUBSCRIBED AND SWORN TO BEFORE ME
this 19th day of March 2011
[Signature]
(Clerk/Notary Public)

NOTARY PUBLIC
STATE OF WISCONSIN

My commission expires 05/25/2011

[Signature]
(Officer of Corporation/Member/Manager of Limited Liability Company/Partner/Individual)

[Signature]
(Officer of Corporation/Member/Manager of Limited Liability Company/Partner)

[Signature]
(Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK			
Date received and filed with municipal clerk	Date reported to council/board	Date provisional license issued	Signature of Clerk / Deputy Clerk
Date license granted	Date license issued	License number issued	

21857
A-4
p-406

15. Utilizing your market research, who would you project your target market to be?

Young adults, professional, business owners

16. What age range would you hope to attract to your establishment? 25-50

17. Describe how you plan to advertise/promote your business. What products will you be advertising?

Local newspapers, print and online media.

18. Are you operating under a lease or franchise agreement? Yes (attach a copy) No

19. Owner of building where establishment is located: Anthony & Nicholas Schiavo, LLC

Address of Owner: 108 King Street, Madison, WI 53703 Phone Number 608-770-2784

20. Private organizations (clubs): Do your membership policies contain any requirement of "Invidious" (likely to give offense) discrimination in regard to race, creed, color, or national origin? Yes No N/A

21. List the Directors of your Corporation/LLC

Yip Yip 534 Plaza Drive, #209, Madison, WI 53719

Name Address

Tatsiana Zhykharevich 351 E Main Street, #307, Sun Prairie, WI 53590

Name Address

Name Address

22. List the Stockholders of your Corporation/LLC

Yip Yip 534 Plaza Drive, #209, Madison, WI 53719 100.00

Name Address % of Ownership

Name Address % of Ownership

Name Address % of Ownership

23. What type of establishment are you? (Check all that apply) Tavern Nightclub Restaurant

Other Please Explain. _____

24. What type of food will you be serving, if any? Sushi

Breakfast Lunch Dinner

25. Please submit a sample menu with your application, if possible. What might eventually be included on your

operational menu when you open? Appetizers Salads Soups Sandwiches Entrees

Desserts Pizza Full Dinners

26. During what hours of your operation do you plan to serve food? 11:30a - 2:30p; 4:30p - 10:00p

27. What hours, if any, will food service not be available? 2:30p - 4:30p
28. Indicate any other product/service offered. Food, Sushi & Seafood
29. Will your establishment have a kitchen manager? Yes No
30. Will you have a kitchen support staff? Yes No
31. How many wait staff do you anticipate will be employed at your establishment? 3
During what hours do you anticipate they will be on duty? 11:30a - 10:00p
32. Do you plan to have hosts or hostesses seating customers? Yes No
33. Do your plans call for a full-service bar? Yes No
If yes, how many bar stools do you anticipate having at your bar? _____
How many bartenders do you anticipate you would have working at one time on a busy night? _____
34. Will there be a kitchen facility separate from the bar? Yes No N/A
35. Will there be a separate and specific area for eating only? Yes No
If yes, what will be the seating capacity for that area? _____
36. What type of cooking equipment will you have? Stove Oven Fryers Grill Microwave
37. Will you have a walk-in cooler and/or freezer dedicated solely to the storage of food products? Yes No
38. What percentage of your overall payroll do you anticipate will be devoted to food operation salaries?
\$13,000 per month
39. If your business plan includes an advertising budget, what percentage of your advertising budget do you anticipate will be related to food? \$1,000 per month
What percentage of your advertising budget do you anticipate will be drink related? 10%
40. Are you currently, or do you plan to become, a member of the Madison—Dane County Tavern League or the Tavern League of Wisconsin? Yes No
41. Are you currently, or do you plan to become, a member of the Wisconsin Restaurant Association or the National Restaurant Association? Yes No
-

42. What is your estimated capacity? 50

43. Pursuant to Chapter 23 of the Madison General Ordinances, all restaurants and taverns serving alcohol beverages shall substantiate their gross receipts for food and alcohol beverage sales broken down by percentage. For new establishments, the percentage will be an estimate.


Gross Receipts from Alcoholic Beverages	10	%
Gross Receipts from Food and Non-Alcoholic Beverages	90	%
Gross Receipts from Other		%
Total Gross Receipts	100%	


44. Do you have written records to document the percentages shown? Yes No
You may be required to submit documentation verifying the percentages you've indicated.

Read carefully before signing: Under penalty provided by law, the applicant states that the above information has been truthfully completed to the best of the knowledge of the signer. Signer agrees to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted will not be assigned to another. Any lack of access to any portion of a licensed premise during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license.

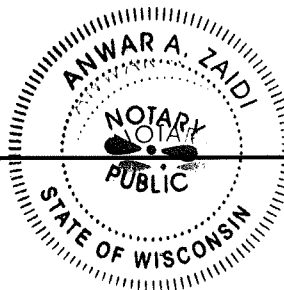
Subscribed and Sworn to before me:

this 19 day of March, 2011


(Officer of Corporation/Member of LLC/Partner/Individual)


(Clerk/Notary Public)

My commission expires May 25, 2014



Appointment of New Liquor/Beer Agent

To be completed by Corporate Officer or Member of LLC

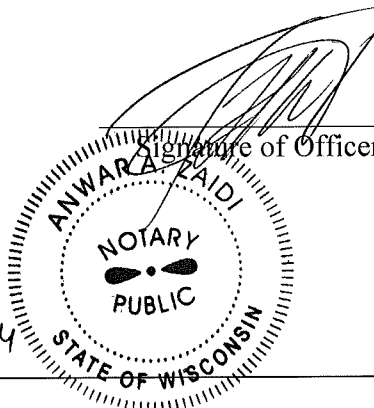
I, Tatsiana Zhykharevich, officer/member for Red Corporation
(Corporation/LLC), doing business as Red Japanese Sushi Bar, authorize and appoint
Yip (Jack) Yip (Name) as the liquor/beer agent for the premise
located at 106 King Street, Madison, WI 53703.

Subscribed and sworn to before me this

19th Day of March, 2011

ASW
Notary Public, Dane County, Wisconsin

My Commission Expires 05/25/2014



To be completed by appointed Liquor/Beer Agent

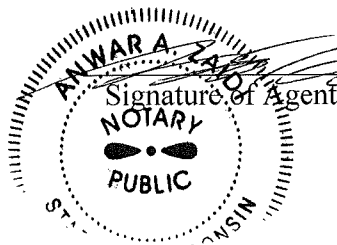
I, Yip (Jack) Yip, appointed **liquor/beer agent** for
Red Corporation (name of Corporation or LLC), being first duly sworn
say I have vested in me, by properly authorized and executed written delegation, full authority
and control of the premise described in the license of such corporation or limited liability
company, and I am involved in the actual conduct of the business as an employee, or have a
direct financial interest in the business of the licensee, therein relating to the intoxicating
liquor/fermented malt beverage. The interest I have in the business is 100 %.

Subscribed and sworn to before me this

19th Day of March, 2011

ASW
Notary Public, Dane County, Wisconsin

My Commission Expires 05/25/2014



The appointed Liquor/Beer Agent must complete the other side of this form.

Transfer of Ownership

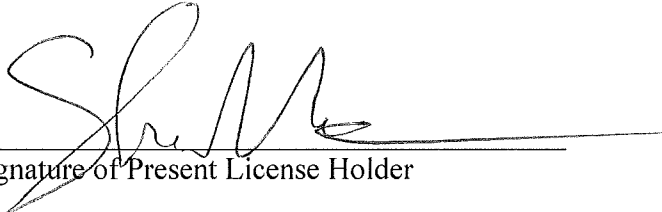
(letter to surrender previous license)

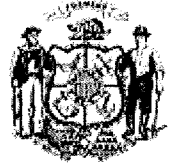
To be filed with the City Clerk at the time a new application is submitted for a change of ownership for any liquor and/or beer establishment.

The LIQUOR + BEER TYPE B license for the premise located at
Class of License
106 KING ST. will be relinquished upon the
Street Address
approval of the application and the issuance of the same type of license for the same
premises to Red Corporation.
License Applicant

There have been no convictions for violations during the current license year, nor are there any pending violations against the present licensee except as follows:

N/A

 3/23/11
Signature of Present License Holder Date



Sec. 180.0202
Wis. Stats.

State of Wisconsin
Department of Financial Institutions

ARTICLES OF INCORPORATION - STOCK FOR-PROFIT CORPORATION

Executed by the undersigned for the purpose of forming a Wisconsin Stock For-Profit Corporation under Chapter 180 of the Wisconsin Statutes:

- Article 1. **Name of the corporation:**
Red Corporation.

- Article 2. **The corporation is organized under Ch. 180 of the Wisconsin Statutes.**

- Article 3. **Name of the initial registered agent:**
Yip Yip

- Article 4. **Street address of the initial registered office:**
107 King Street
Madison, WI 53703
United States of America

- Article 5. **Number of shares of stock the corporation shall be authorized to issue:**
Number of Shares Authorized: 9,000
Class: Common

- Article 6. **Name and complete address of each incorporator:**
Yip Yip
534 Plaza Drive
#209
Madison, WI 53719
United States of America

Tatsiana Zhykharevich
351 E Main Street
#307
Sun Prairie, WI 53590

United States of America

Other provisions (optional). (No other provisions declared.)

Other Information. **This document was drafted by:**
Anwar A Zaidi

Incorporator signature:

Yip Yip

Tatsiana Zhykharevich

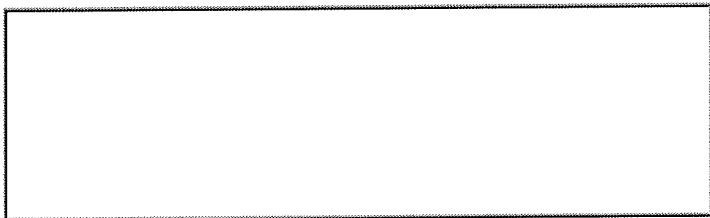
Date & Time of Receipt:

3/15/2011 9:35:49 AM

Credit Card Transaction Number:

201103152532217

ARTICLES OF INCORPORATION - Wisconsin Stock For-Profit Corporation (Ch. 180)



Filing Fee: \$100.00
Total Fee: \$100.00

ENDORSEMENT

State of Wisconsin

Department of Financial Institutions

EFFECTIVE DATE	
3/15/2011	

FILED 3/22/2011	
	Entity ID Number R054552



DEPARTMENT OF THE TREASURY
INTERNAL REVENUE SERVICE
CINCINNATI OH 45999-0023

Date of this notice: 03-15-2011

Employer Identification Number:
45-0601296

Form: SS-4

Number of this notice: CP 575 A

RED CORPORATION
107 KING ST
MADISON, WI 53703

For assistance you may call us at:
1-800-829-4933

IF YOU WRITE, ATTACH THE
STUB AT THE END OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 45-0601296. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear off stub and return it to us.

Based on the information received from you or your representative, you must file the following form(s) by the date(s) shown.

Form 940	01/31/2012
Form 944	01/31/2012
Form 1120	03/15/2012

If you have questions about the form(s) or the due date(s) shown, you can call us at the phone number or write to us at the address shown at the top of this notice. If you need help in determining your annual accounting period (tax year), see Publication 538, *Accounting Periods and Methods*.

We assigned you a tax classification based on information obtained from you or your representative. It is not a legal determination of your tax classification, and is not binding on the IRS. If you want a legal determination of your tax classification, you may request a private letter ruling from the IRS under the guidelines in Revenue Procedure 2004-1, 2004-1 I.R.B. 1 (or superseding Revenue Procedure for the year at issue). Note: Certain tax classification elections can be requested by filing Form 8832, *Entity Classification Election*. See Form 8832 and its instructions for additional information.

IMPORTANT INFORMATION FOR S CORPORATION ELECTION:

If you intend to elect to file your return as a small business corporation, an election to file a Form 1120-S must be made within certain timeframes and the corporation must meet certain tests. All of this information is included in the instructions for Form 2553, *Election by a Small Business Corporation*.

If you are required to deposit for employment taxes (Forms 941, 943, 940, 944, 945, CT-1, or 1042), excise taxes (Form 720), or income taxes (Form 1120), you will receive a Welcome Package shortly, which includes instructions for making your deposits electronically through the Electronic Federal Tax Payment System (EFTPS). A Personal Identification Number (PIN) for EFTPS will also be sent to you under separate cover. Please activate the PIN once you receive it, even if you have requested the services of a tax professional or representative. For more information about EFTPS, refer to Publication 966, *Electronic Choices to Pay All Your Federal Taxes*. If you need to make a deposit immediately, you will need to make arrangements with your Financial Institution to complete a wire transfer.

The IRS is committed to helping all taxpayers comply with their tax filing obligations. If you need help completing your returns or meeting your tax obligations, Authorized e-file Providers, such as Reporting Agents (payroll service providers) are available to assist you. Visit the IRS Web site at www.irs.gov for a list of companies that offer IRS e-file for business products and services. The list provides addresses, telephone numbers, and links to their Web sites.

To obtain tax forms and publications, including those referenced in this notice, visit our Web site at www.irs.gov. If you do not have access to the Internet, call 1-800-829-3676 (TTY/TDD 1-800-829-4059) or visit your local IRS office.

IMPORTANT REMINDERS:

- * Keep a copy of this notice in your permanent records. **This notice is issued only one time and the IRS will not be able to generate a duplicate copy for you.**
- * Use this EIN and your name exactly as they appear at the top of this notice on all your federal tax forms.
- * Refer to this EIN on your tax-related correspondence and documents.

If you have questions about your EIN, you can call us at the phone number or write to us at the address shown at the top of this notice. If you write, please tear off the stub at the bottom of this notice and send it along with your letter. If you do not need to write us, do not complete and return the stub. Thank you for your cooperation.

Keep this part for your records.

CP 575 A (Rev. 7-2007)

Return this part with any correspondence so we may identify your account. Please correct any errors in your name or address.

CP 575 A

9999999999

Your Telephone Number () -

Best Time to Call

DATE OF THIS NOTICE: 03-15-2011

EMPLOYER IDENTIFICATION NUMBER: 45-0601296

FORM: SS-4

NOBOD

INTERNAL REVENUE SERVICE
CINCINNATI OH 45999-0023



RED CORPORATION
107 KING ST
MADISON, WI 53703

Subject: Wisconsin Business Tax Registration Confirmation

From: DORRegistration@revenue.wi.gov

Date: 15 Mar 2011 16:21:39 -0500

To: azaidi@abacusconsulting.co

We have processed your Business Tax Registration (BTR) application that you recently submitted electronically. We have issued the following tax accounts and tax account identification numbers:

RED CORPORATION

Seller's Permit	Tax Account Identification Number	456-1027265993-03
Withholding Tax	Tax Account Identification Number	036-1027265993-04

You should receive additional information about your account(s), including your registration certificate and applicable permits, within 7-10 days. If any registration fee is due you will also receive a bill for the fee amount.

Wisconsin Department of Revenue
Registration Unit

RED Refine Elegant Delicious

Contemporary Japanese Sushi Bar

106 King Street, Madison, WI 53703
Sushi Happy Hour -7 Days from 4:00pm-6:00pm

Brown Rice / Deep Fried/ Soy Paper/ Rice Paper + \$1.00 each Roll
 Cream Cheese add \$.50 each Roll

Table:	Price	Sushi	Sashimi
Sever:			
SUSHI or SASHIMI (1 ORDER = 1 PIECE)			
Maguro (Tuna) Raw	2.00		
Spicy Tuna Raw	2.25		
Toro (Fatty Tuna) Raw	3.00		
Shiro-Maguro (Escolar) Raw	2.00		
Hamachi (Yellowtail) Raw	2.25		
Sake (Fresh Salmon) Raw	2.00		
Spicy Salmon Raw	2.25		
Smoked Salmon	2.25		
Tai (Red Snapper) Raw	2.00		
Tako (Octopus)	2.25		
Baby Octopus	2.25		
Ika (Squid) Raw	2.00		
Ebi (Prawn)	2.00		
Amaebi (Jumbo Sweet Shrimp) Raw	2.50		
Unagi (Fresh Water Eel)	2.00		
Anago (Sea Eel)	2.00		
Kani (King Crab)	3.50		
Masago (Smelt Eggs)	1.75		
Tobiko (Flying Fish Eggs) Raw	2.00		
Ikura (Salmon Eggs) Raw	2.50		
Tamago (Eggs Omelet)	1.75		
Hotate (Japanese Jumbo Scallop) Raw	2.50		
Saba (Mackerel) Raw	2.00		
Uni (Sea Urchin) Raw	3.50		
Kanikama (Krab Stick)	1.75		
Conch	2.25		
Quail Egg	0.50		

Sushi Appetizer	
Tataki (Seared Tuna or Escolar)	8.95
Tuna or Spicy Tuna Avocado Salad	8.95
Seafood Sunomono	6.95
Tuna Flight	9.95
Shell Fish Lover	9.95
Cooked Sushi (5 Assorting Pieces)	6.95
Sashimi (8 Assorting Pieces)	8.95

Sushi Dinner	
Sushi Regular (7 Assorting pieces & CA Roll)	14.95
Sushi Deluxe (10 Assorting Pieces & Tuna Roll)	17.95
Sashimi Regular (14 Assorting pieces)	16.95
Sashimi Deluxe (20 Assorting pieces)	20.95
Susuhi & Sashimi Dinner (16 pcs Assorting Sashimi & Sushi & a Tuna Roll)	23.95
Chirashi (Assorted Sashimi Served over a bowl of rice)	17.95
Tekkadon (Fresh Tuna served over a bowl of rice)	17.95
Unagi Don (Boiled Eel served over a bed of seasoned rice)	19.95
Roll Combination (California, Tuna, & Yellowtail)	11.95

Consuming raw or undercooked meats, poultry, seafood, shellfish, or Eggs may increase your risk of foodborne illness, especially if you have certain medical conditions.

Rolls (6-8 PIECES ROLL or 1 HAND-ROLL)	Price	Qty
Tekka (Tuna) Raw	4.00	
Boston (Tuna & Avocado) Raw	5.00	
Spicy Tuna (Spicy Tuna w/ Avocado) Raw	5.50	
Sake (Fresh Salmon) Raw	4.00	
Salmon Skin Roll	6.00	

Alaskan Roll (Fresh Salmon & Avocado) Raw	5.00	
Philly Roll (Smoked Salmon, Avocado & Cream Cheese)	5.50	
Spicy Salmon Roll (Spicy Salmon w/ Avocado)Raw	5.50	
Spicy Smoked Salmon Roll (w/ Avocado)	6.00	
Negihama (Yellowtail, Avocado & Scallion) Raw	4.00	
Spicy Yellowtail Roll Raw	5.50	
Cucumber Roll	4.00	
Avocado Roll	4.00	
Vegan Roll (Organic Mix Green, Avocado, Cucumber & Marinated Squash)	6.95	
Veg Tempura Roll (Sweet Potato & Carrot Tempura w/ Avocado)	5.00	
Chicken Tempura Roll (Chicken & Avocado)	6.00	
Shrimp Tempura Roll (Shrimp Tempura, Avocado)	6.00	
New York Roll (Shrimp & Avocado)	5.00	
Tampa (Tempura Fish, Avocado, Cream Cheese, Spicy Mayo, top w/ Fish Eggs)	6.95	
Unagi (Eel, Avocado, & Cucumber)	5.00	
California (Kani, Cucumber, & Avocado)	5.00	
Mexican (Shrimp Tempura, Avocado, Cream Cheese, & Fish Eggs)	7.00	
Godzilla (Mexican roll w/ Tempura Crunch)	8.00	
Caterpillar (Eel & Cucumber, top w/ Avocado)	8.95	
Buccaneers (Shrimp & Kani, Cream Cheese & Cucumber top w/ Tuna)	9.95	
Amigo (Yellowtail, Scallion, Jalapeno, Garnished w/ Cilantro)	7.00	
Dragon Roll (Shrimp Tempura roll top w/ Eel & Avocado)	10.95	
Red Dragon (Spicy Tuna, top w/ Tuna, Fish eggs)	10.95	
White Dragon (Prawn & Crab salad, top w/ Seared Japanese Jumbo Scallop)	10.95	
Crazy Dragon (CA Roll top w/ Avocado & Eel)	10.95	
Spider Roll (Soft Shell Crab Tempura, Avocado, & Cucumber)	9.95	
Rainbow (CA Roll, top w/ Tuna, Salmon, & yellowtail)	9.95	
Rock N Roll (Shrimp Tempura, Kani, Avocado, fish egg wrap w/ soy paper)	8.95	
Creamy Scallop or Crab (w/ Avocado)	6.00	
General Tso's Chicken (General Tso's Chicken, avocado, top with General Tso's Sauce)	6.95	
Peking (Crispy Duck, Scallion and Mango topped with Avocado)	9.95	
Tropical (Spicy Tuna, avocado & Mango)	5.75	
Surf N Turf (Seared Filet Mignon top on blue crab & Avocado served with Special Steak Sauce)	10.95	
Signature Roll		
Cho-Wa (Tuna Roll top w/ Salmon & Avocado) Raw	10.95	
Sumo (Spicy Shrimp topped with Spicy Tuna & Spicy Crab) Raw	10.95	
Shogun (Shrimp Tempura, Cucumber, Kani, Lettuce, Topped w/ Ebi, Avocado and Tobiko)	10.95	
Osaka Castle (Soft Shell Crab, Avocado, Cucumber, Crab Meat and top w/ Unagi)	10.95	
Lobster Tempura Roll (Lobster Tempura, Avocado, Masago roll in Soy Paper)	10.95	
Hattori Hanzo (Salmon Skin, Unagi, Green onion, Crab Meat, and Cucumber rolled in Soy Paper, Topped w/ Tuna, White Tuna, Salmon, Yellowtail, Tobiko and Green Onion) Raw	10.95	
Omega (organic green top w/ Salmon & Tuna) Raw	10.95	
Crab Lover (Spider top w/ Spicy Crab)	10.95	
Bushido (Salmon, Escobar, Avocado, & Jalapeno top w/ Spicy Tuna & Fish Eggs) Raw	10.95	
Super Volcano (Tempura White Fish, Cream Cheese, Avocado, top w/ baked Kani, Shrimp & Scallop)	10.95	
Sensu (Crab Meat and Avocado, top w/ Salmon) Raw	10.95	
Sasuke (Cream Cheese, Cucumber, Avocado, top w/ Smoked Salmon and Black Tobiko)	10.95	
The Great Buddha (Tuna, Unagi, Cucumber and Crab Meat, top w/ Salmon, Avocado, and Tobiko) Raw	10.95	
Old Volcano (CA w/C.C top w/ Baked Kani)	10.95	

